### 2020 No. 143

### **CENSUS**

## The Census (Scotland) Regulations 2020

Made - - - - 5th May 2020

Laid before the Scottish Parliament 7th May 2020

Coming into force - - 16th June 2020

The Scottish Ministers make the following Regulations in exercise of the powers conferred by section 3(1) of the Census Act 1920(a) and all other powers enabling them to do so.

#### Citation, commencement and extent

- 1.—(1) These Regulations may be cited as the Census (Scotland) Regulations 2020 and come into force on 16 June 2020.
  - (2) They extend to Scotland only.

#### Interpretation

**2.**—(1) In these Regulations—

"the Census Order" means the Census (Scotland) Order 2020(b),

"the Registrar General" means the Registrar General of Births, Deaths and Marriages for Scotland.

#### Methods of making a return

- **3.**—(1) A return mentioned in article 5(1) or (2) of the Census Order is to be made by submitting—
  - (a) an A1 submission,
  - (b) an A2 submission, or
  - (c) an A3 submission.
  - (2) A return mentioned in article 5(9) or (11) of the Census Order is to be made by submitting—
    - (a) an A1 submission or an A3 submission, each as modified by paragraph (3), or
    - (b) an A2 submission as modified by paragraph (4).

<sup>(</sup>a) 1920 c.41. Section 3(1) is relevantly amended by the Statute Law (Repeals) Act 1993 (c.50), schedule 1, Part 16, paragraph 1 and the Statistics and Registration Service Act 2007 (c.18), schedule 1, paragraph 3(2) and (3).

<sup>(</sup>b) S.S.I. 2020/76.

- (3) In the case of an A1 submission or an A3 submission those modifications are that—
  - (a) in column (1) of the thirteenth row of the table set out in schedule 1 (electronic questionnaire household questions) the words "only this household can use" are to be read as "is only for use with this accommodation",
  - (b) in column (1) of the fourteenth row of the table set out in schedule 1 the words "only by this household" are to be read as "in this accommodation".
- (4) In the case of an A2 submission those modifications are that—
  - (a) in the section titled "Declaration" on the first page of the questionnaire the word "Signature(s)" is to be read as "Sign and print full name",
  - (b) the questionnaire is to be read as if questions H1, H2, H6, H11 to H15, and "individual questions person 1" to "individual questions person 5" were omitted,
  - (c) in question H8 of the questionnaire the words "only this household can use" are to be read as "is only for use with this accommodation",
  - (d) in question H9 of the questionnaire the words "only by this household" are to be read as "in this accommodation".
- (5) In paragraph (4) "the questionnaire" means the questionnaire set out in schedule 5 (paper household questionnaire).
  - (6) A return mentioned in article 5(5)(b) of the Census Order is to be made by submitting—
    - (a) a B1 submission,
    - (b) a B2 submission, or
    - (c) a B3 submission.
  - (7) A return mentioned in article 5(6) of the Census Order is to be made by submitting—
    - (a) a C1 submission,
    - (b) a C2 submission, or
    - (c) a C3 submission.
  - (8) A return mentioned in article 5(7) or (8) of the Census Order is to be made by submitting—
    - (a) a D1 submission,
    - (b) a D2 submission, or
    - (c) a D3 submission.
- (9) But sub-paragraphs (a) and (c) of paragraph (8) do not apply in relation to a person in Group V (within the meaning of the Census Order).
- (10) A person submitting an A1 submission, an A3 submission, a B1 submission, a B3 submission, a C1 submission, a C3 submission, a D1 submission, or a D3 submission in accordance with this regulation must comply with the instructions in column (2) of the table set out in (as the case may be) schedule 1, 2, 3, or 4.
- (11) A person submitting an A2 submission, a B2 submission, a C2 submission, or a D2 submission in accordance with this regulation must comply with the instructions contained in the questionnaire set out in (as the case may be) schedule 5, 6, 7, or 8.
- (12) A submission is submitted in accordance with this regulation, and the requirement to make a return under the Census Order is discharged, when the submission—
  - (a) states the particulars required by article 6 of the Census Order,
  - (b) records the declaration of the person making the return as to the accuracy of the return, and
  - (c) is received by the Registrar General.
- (13) A submission under any of paragraphs (1), (2), and (6) to (8) must be submitted to the Registrar General by 2 May 2021 or as soon thereafter as is reasonably practicable.

- (14) For the purpose of making it easier for a person submitting an A1 submission, an A3 submission, a B1 submission, a B3 submission, a C1 submission, a C3 submission, a D1 submission, or a D3 submission to understand the questions, instructions, and response options contained in the table set out in (as the case may be) schedule 1, 2, 3, or 4, the Registrar General may do either or both of the following—
  - (a) modify any of the questions, instructions, and response options set out in schedule 1, 2, 3, or 4.
  - (b) translate the questions, instructions and response options set out in schedule 1, 2, 3, or 4.
- (15) The Registrar General may modify a questionnaire set out in (as the case may be) schedule 5, 6, 7, or 8 for the purpose of making it easier for a person submitting an A2 submission, a B2 submission, a C2 submission, or a D2 submission to understand or use that questionnaire.

#### (16) In this regulation—

- "A1 submission", means a submission made using an electronic system provided by the Registrar General responding to the relevant questions, instructions, and response options set out in schedule 1 and schedule 2 (electronic questionnaire household individual questions),
- "A2 submission" means a submission made using the questionnaire set out in schedule 5 and, if relevant, a continuation questionnaire, and returned to the Registrar General using a prepaid, pre-addressed envelope provided by the Registrar General,
- "A3 submission" means a submission made by telephone by providing responses to a telephone operator to the relevant questions, instructions, and response options set out in schedule 1 and schedule 2,
- "B1 submission", means a submission made using an electronic system provided by the Registrar General, responding to the relevant questions, instructions, and response options set out in schedule 2,
- "B2 submission" means a submission made using the questionnaire set out in schedule 6 (paper household individual questionnaire) and returned to the Registrar General using a prepaid, pre-addressed envelope provided by the Registrar General,
- "B3 submission" means a submission made by telephone by providing responses to a telephone operator to the relevant questions, instructions, and response options set out in schedule 2,
- "C1 submission" means a submission made using an electronic system provided by the Registrar General, responding to the questions, instructions, and response options set out in schedule 3 (electronic questionnaire communal establishment),
- "C2 submission" means a submission made using the questionnaire set out in schedule 7 (paper communal establishment questionnaire),
- "C3 submission" means a submission made by telephone by providing responses to a telephone operator to the questions, instructions, and response options set out in the table in schedule 3,
- "continuation questionnaire" means a booklet provided by the Registrar General to enable a return mentioned in article 5(2) of the Census Order to be made with respect to more than five persons in Group I (within the meaning of the Census Order),
- "D1 submission", means a submission made using an electronic system provided by the Registrar General, responding to the relevant questions, instructions, and response options set out in schedule 4 (electronic questionnaire communal establishment individual questions),
- "D2 submission" means a submission made using the questionnaire set out in schedule 8 (paper communal establishment individual questionnaire),
- "D3 submission" means a submission made by telephone by providing responses to a telephone operator to the relevant questions, instructions, and response options set out in the table in schedule 4,
- "relevant questions, instructions and response options" in relation to a numbered schedule means the questions in column (1) of the table in that schedule to which a person making a

return is required to respond so as to state the particulars required by article 6 of the Census Order, together with the corresponding instructions in column (2) and response options in column (3) of that table,

"telephone operator" means a person employed for the purposes of the census directed to be taken by the Census Order to, among other things, record, in an electronic system provided by the Registrar General, the responses of a person making an A3 submission, a B3 submission, a C3 submission or a D3 submission.

#### Duties on persons in charge of communal establishments

- **4.**—(1) This regulation applies where a person ("P") is required to make a return under article 5(6) of the Census Order and has received access codes or paper questionnaires from the Registrar General in respect of returns to be made under article 5(7) of the Census Order.
- (2) P must issue an access code or paper questionnaire to every person within the premises required to make a return by article 5(7) of the Census Order.
  - (3) Paragraph (2) does not apply in respect of any person who appears to P to be—
    - (a) aged under 16 years, or
    - (b) for any other reason, incapable of making a return.
- (4) Where P has issued paper questionnaires under paragraph (2), P must collect the completed questionnaires and deliver them to the Registrar General by 2 May 2021 or as soon thereafter as is reasonably practicable.
  - (5) In this regulation—

"access code" means a code provided by the Registrar General for use by a person required to make a return under article 5(7) of the Census Order, other than a person within Group V (within the meaning of the Census Order), to access the electronic system provided by the Registrar General containing the questions, instructions, and response options set out in schedule 4,

"completed questionnaire" means a paper questionnaire which states the particulars required to be specified by article 6(1) and (5) of the Census Order in respect of the person making the return.

"paper questionnaire" means the questionnaire set out in schedule 8.

#### Giving of information

- **5.**—(1) Where a person ("A") is required by article 5(2), (6), (7), (8), (9), or (11) of the Census Order to make a return in respect of another person ("B"), B must give to A such information as A may reasonably require to make that return.
- (2) But A may not require B to give information with respect to B's age or sex for the purposes of A stating the particulars specified in paragraph 2 of schedule 3 of the Census Order in a return mentioned in article 5(6) of the Census Order.

#### Misuse of information

- **6.** A person to whom information is given pursuant to the Census Order or these Regulations must not, other than for the purposes of the Census Act 1920, the Census Order, or these Regulations—
  - (a) use that information,
  - (b) publish it, or
  - (c) communicate it to any other person.

#### Revocation

- 7. The following instruments are revoked—
  - (a) the Census (Scotland) Regulations 2010(a), and
  - (b) the Census (Scotland) Amendment Regulations  $2010(\mathbf{b})$ .

KATE FORBES A member of the Scottish Government

St Andrew's House, Edinburgh 5th May 2020

<sup>(</sup>a) S.S.I. 2010/211 as amended by S.S.I. 2010/215. (b) S.S.I. 2010/215.

## SCHEDULE 1

Regulation 3(16)

# Electronic Questionnaire - Household Questions

(1)	(2)	(3)
Question	Instruction for respondent	Response options
What is your name?	The respondent is required to state their first and last names in the boxes provided.	
Do you usually live at [address]?	The respondent is required to select one option only.	Yes, this is my permanent or family home
		No, I don't usually live here
Does anyone	The respondent is required to	Yes
usually live at [address]?	include:  ✓ Family members including partners, children and babies born on or before 21 March 2021.  ✓ Students and/or schoolchildren who live away from home during term-time.  ✓ Housemates/flatmates or lodgers.  ✓ People staying temporarily who usually live in the UK but do not have another UK address.  ✓ People who usually live outside the UK who are staying in the UK for 6 months or more.  The respondent is required to	No, no-one counts this address as their permanent or family home
Does anyone else	select one option only.  The respondent is required to	Yes, I need to add someone else
usually live at	include:	
[address]?	✓ Family members including partners, children and babies born on or before 21 March 2021. ✓ Students and/or	No, there is no-one else living here
	schoolchildren who live away from home during term-time.	

Who do you need to add to [address]?	<ul> <li>✓ Housemates/flatmates or lodgers.</li> <li>✓ People staying temporarily who usually live in the UK but do not have another UK address.</li> <li>✓ People who usually live outside the UK who are staying in the UK for 6 months or more.</li> <li>The respondent is required to select one option only.</li> <li>The respondent can add the first and last names of any other individuals who usually live at the address here.</li> </ul>	
Does anyone else usually live at [address] who is temporarily away?	The respondent is not required to add anyone who is temporarily away if they are listed under this question.  The respondent is required to include:  ✓ People who work away from home within the UK, or are members of the Armed Forces, if this is their permanent or family home.  ✓ People temporarily away from home on the night of 21 March 2021.  The respondent is required to select one option only.	Yes, I need to add someone else  No, there is no-one else living here
Who do you need to add to [address] who is temporarily away?	The respondent can add the first and last names of anyone who usually lives at the address but who are temporarily away here.	

Is there anyone staying at	The respondent is required to include:	☐ Yes, I need to add someone else
[address] on the night of 21 March 2021 whose permanent or family home is elsewhere?	People staying here because it is their second address, for example, for work or a holiday home. Their permanent or family home is elsewhere.  People who usually live somewhere else in the UK, for example, boy/girlfriends, friends, relatives.  People who usually live outside the UK who are staying in the UK for less than 6 months.  People here on holiday.  The respondent is required to select one option only.	□ No, there is no-one else staying here on the night of 21 March 2021
Who is staying on	The respondent can add the	
the night of 21 March 2021 at	first and last names of anyone whose permanent or family	
[address] whose permanent or	home is elsewhere but who is staying at the address on the	
family home is elsewhere?	night of 21 March 2021 here.	
What are [person	The respondent is required to	Person A is—
A's] relationships to the following	select an option for each relationship.	• the husband or wife of,
people?	retationship.	• the registered civil partner of,
		• the partner of,
		• the son or daughter of,
		• a step-child of,
		• brother or sister to,
		• step-brother or step-sister to,
		• mother or father of,
		• step-mother or step-father of,
		• the grandchild of,
		• the grandparent of,
		another relation to (including in-
		laws),  unrelated to (including foster child)
		Person B

What type of accommodation is this?	The respondent is required to select one option only.	A whole house or bungalow that is:  detached semi-detached terraced (including end-terrace)  A flat, maisonette, or apartment that is:  in a tenement or purpose built block of flats (including '4-in-a-block) part of a converted or shared house (including bed-sits)
Are all the rooms in this accommodation behind a door that	The respondent is required to select one option only.	in a commercial building (for example, in an office building, hotel or over a shop)  A mobile or temporary structure:  a caravan or other mobile or temporary structure  Yes  No
only this household can use?		
How many bedrooms are available for use only by this household?	The respondent is required to include all rooms built or converted for use as bedrooms.	
What type of central heating does this accommodation have?	Central heating is a central system that generates heat for multiple rooms.  If central heating is available, the respondent should select the option whether they use it	No central heating or  Mains Gas  Other gas (including liquid petroleum gas and biogas)  Electric (including storage heating)
	or not.  The respondent is required to select all options that apply.	Oil Solid fuel (excluding wood)

		Wood or biomass (logs, pellets,
		chippings)
		Other renewable energy source (including electric and air heat pump systems)
		District or communal heat system
		Other
Does your	The respondent is required to	Owns with a mortgage or loan
household own or rent this	select one option only.	Owns outright
accommodation?		Owns with shared equity (for example, LIFT, Help-to-Buy)
		Rents (with or without housing
		benefit) Part owns and part rents (shared
		ownership)
		Lives here rent free
Who is your	The respondent is required to	Council (Local Authority) or
landlord?	select one option only.	Housing Association / Registered Social Landlord
		Private landlord or letting agency
		Other
In total, how many	The respondent is required to	None
cars or vans are owned, or are	include any company car(s) or van(s) available for private use.	1
available for use,	van(s) available for private use.	2
by members of	The respondent is required to	3
this household?	select one option only.	4 or more
	If the respondent selects "4 or	
	more" they may enter the	
What is [visitor	number in the box provided.  The respondent is required to	
A]'s date of birth?	use the format DD MM YYYY	
XX 11	in the boxes provided.	
What is [visitor A]'s sex?	The respondent is required to select one option only.	Female
		Male
What is [visitor A]'s usual UK address?	The respondent is required to select one option only.	An address in the UK
address?	If [visitor A] has an address in the UK, the respondent should provide the address.	Outside the UK
	If [visitor A] lives outside the UK, the respondent should provide the country in which [visitor A] usually lives.	

## SCHEDULE 2

Regulation 3(16)

# Electronic Questionnaire – Household Individual Questions

(2)	(3)	
Instruction for respondent		
The respondent is required to use the format DD MM YYYY in the boxes provided.		
The respondent is required to select one option only.		Female Male
A voluntary question about trans status or history will follow if the respondent is aged 16 or over.		
This question is voluntary.		No
Trans is a term used to describe people whose gender is not the same as the sex they were registered at birth.		Yes, please describe your trans status (for example, non-binary, trans man, trans woman)
If the respondent chooses to respond to this question they are required to select one option only.		
If the respondent selects "yes" to this question they may type how they describe their trans status in the box provided, for example, non-binary, trans man, trans woman.		
	Instruction for respondent The respondent is required to use the format DD MM YYYY in the boxes provided. The respondent is required to select one option only.  A voluntary question about trans status or history will follow if the respondent is aged 16 or over. This question is voluntary.  Trans is a term used to describe people whose gender is not the same as the sex they were registered at birth.  If the respondent chooses to respond to this question they are required to select one option only.  If the respondent selects "yes" to this question they may type how they describe their trans status in the box provided, for example, non-binary, trans man, trans	Instruction for respondent The respondent is required to use the format DD MM YYYY in the boxes provided. The respondent is required to select one option only.  A voluntary question about trans status or history will follow if the respondent is aged 16 or over.  This question is voluntary.  Trans is a term used to describe people whose gender is not the same as the sex they were registered at birth.  If the respondent chooses to respond to this question they are required to select one option only.  If the respondent selects "yes" to this question they may type how they describe their trans status in the box provided, for example, non-binary, trans man, trans

On 21 March 2021, what is your legal marital or registered civil partnership status?	The respondent is required to select one option only.	Never married and never registered in a civil partnership  Married  In a registered civil partnership  Separated, but still legally married  Separated, but still legally in a civil partnership  Divorced  Formerly in a civil partnership which is now legally dissolved  Widowed  Surviving partner from a civil partnership
Are you a schoolchild or student in full-time education?  During term-	The respondent is required to select one option only.  The respondent is	Yes No Yes
time, do you live at [address]?	required to select one option only.	No, during term-time I live at another address
Which of the following best describes your sexual orientation?	This question is voluntary.  If the respondent chooses to respond to this question they are required to select one option only.  If the respondent selects "Other sexual orientation" they may type how they describe their sexual orientation in the box provided.	Straight or Heterosexual  Gay or Lesbian  Bisexual  Other sexual orientation

What is your	The respondent is		Scotland
country of birth?	required to select one option only.		England
	option only.		Northern Ireland
	If the respondent		Wales
	selects "Elsewhere"		Republic of Ireland
	they are required to provide the name of		Elsewhere
	their country of birth		
	in the box provided.		
If you were not born in the	The respondent is not required to count		
United Kingdom,	short visits away from		
when did you most recently	the UK.		
arrive to live	The respondent is		
here?	required to use the		
	format MM YYYY in the boxes provided.		
One year ago,	If the respondent had		[Address]
what was your usual address?	no usual address one year ago, they are		Student term-time / boarding school address
usuai address.	required to enter the		in the UK
	address where they		Another address in the UK
	were staying on 21 March 2020 in the	П	Outside the UK
	box provided.		
	The respondent is		
	required to select one		
Do you look	option only.  The respondent is not		No
after, or give any	required to count		Yes, 1 to 19 hours a week
help or support to family members,	anything they do as part of their paid		Yes, 20 to 34 hours a week
friends,	employment.		·
neighbours or others because of	The respondent is		Yes, 35 to 49 hours a week
either:	required to select one		Yes, 50 or more hours a week
	option only.		Tes, se et more nears a week
• long term			
physical / mental ill-			
health /			
disability;			
or problems			
related to			
old age?			

How well can you understand, speak, read and write English?	The respondent is required to select one option for each.	I understand spoken English—  Very well Well Not well Not at all I speak English— Very well Well Not well Not well Not at all
		I read English—  Very well  Well  Not well  Not at all
		<ul> <li>I write English—</li> <li>Very well</li> <li>Well</li> <li>Not well</li> <li>Not at all</li> </ul>
Can you understand, speak, read and write Scottish Gaelic?	The respondent is required to select all options that apply.	<ul> <li>☐ Understand spoken Scottish Gaelic</li> <li>☐ Speak Scottish Gaelic</li> <li>☐ Read Scottish Gaelic</li> <li>☐ Write Scottish Gaelic</li> <li>or</li> <li>☐ No skills in Scottish Gaelic</li> </ul>
Can you understand, speak, read and write Scots?	The respondent is required to select all options that apply.	<ul> <li>☐ Understand spoken Scots</li> <li>☐ Speak Scots</li> <li>☐ Read Scots</li> <li>☐ Write Scots</li> <li>☐ or</li> <li>☐ No skills in Scots</li> </ul>
Can you use British Sign Language (BSL)? What is your main language?	The respondent is required to select one option only.  The respondent is required to select one	Yes No English
How is your health in general?	option only.  The respondent is required to select one option only.	Other (including BSL and Tactile BSL)  Very good Good Fair Bad Very bad

Do you have any of the following,	The respondent is required to select all	Deafness or partial hearing loss
which have lasted, or are	options that apply.	Blindness or partial sight loss
expected to last, at least 12 months?	If the respondent selects "Other condition" they may	Full or partial loss of voice or difficulty speaking: a condition that requires you to use equipment to speak
	enter their condition in the box provided.	Learning disability: a condition that you have had since childhood that affects the way you learn, understand information and communicate
		Learning difficulty: a specific learning condition that affects the way you learn and process information
		Developmental disorder: a condition that you have had since childhood which affects motor, cognitive, social and emotional skills, and speech and language
		Physical disability: a condition that substantially limits one or more basic physical activities such as walking, climbing stairs, lifting or carrying
		Mental health condition: a condition that affects your emotional, physical and mental wellbeing
		Long-term illness, disease or condition: a condition, not listed above, that you may have for life, which may be managed with treatment or medication
		Other condition
		or
		No condition
Are your day-to-	The respondent is	Yes, limited a lot
day activities limited because	required to include problems related to	Yes, limited a little
of a health problem or	old age.	No
disability which has lasted, or is expected to last, at least 12 months?	The respondent is required to select one option only.	

	What passports	The respondent is		United Kingdom
	do you hold?	required to select all options that apply.		Ireland
		If the respondent selects "Other" they		Other
		are required to enter their first passport		None
		and, if applicable,		
		their second passport in the boxes		
	What religion,	provided. This question is		None
	religious denomination or	voluntary.		
	body do you belong to?	If the respondent chooses to respond to		Church of Scotland
	belong to:	this question they are required to select one		Roman Catholic
		option only.		Other Christian  Muslim
		If the respondent		Hindu
		selects "Other		Buddhist
		Christian" they may enter their other		Sikh
		Christian religion, religious		Jewish
		denomination or body in the box provided.		Pagan
		_		Another religion or body
		If the respondent selects "Muslim"		
		they may enter their Muslim		
		denomination or school in the box		
		provided.		
		If the respondent		
		selects "Another religion or body"		
		they may enter their religion, religious		
		denomination or body in the box provided.		
l	What do you feel	The respondent is		Scottish
	is your national identity?	required to select all options that apply.		English
	<b>J</b>	If the respondent		Northern Irish
		selects "Other" they are required to enter		Welsh
		their national identity in the box provided.		British
ĺ		in the box provided.	╽╙	

		Other
What is your ethnic group?	The respondent is required to select one option only.	White (including Gypsy, Traveller, Roma, Showman / Showwoman)
	The next question asks the respondent about their ethnic	Mixed or multiple ethnic groups (including any mixed or multiple ethnic groups)
	group in more detail.	Asian, Scottish Asian or British Asian (including any Asian ethnic group)
		African, Scottish African or British African (including any African ethnic group)
		Caribbean or Black (including Scottish Caribbean, Black
		Scottish) Other ethnic group (any other ethnic group, including Arab, Sikh, Jewish)
Which one best	The respondent is	Scottish
describes your white ethnic	required to select one option only.	Other British
group or	Transfer y	Irish
background?	If the respondent selects "Other" they are required to enter	Polish
		Gypsy / Traveller
	their other white	Roma
	ethnic group in the box provided.	Showman / Showwoman
	oox provided.	Other white ethnic group
What are your mixed or multiple ethnic groups?	The respondent is required to provide their ethnic groups.	
Which one best describes your	The respondent is required to select one	Pakistani, Scottish Pakistani or British Pakistani
Asian, Scottish Asian or British	option only.	Indian, Scottish Indian or British Indian
Asian of British Asian ethnic		Bangladeshi, Scottish
group or	If the respondent selects "Other" they	Bangladeshi or British Bangladeshi
background?	are required to enter	Chinese, Scottish Chinese or British Chinese
	their other Asian ethnic group in the box provided.	Other
What is your	The respondent is	
African, Scottish African or British	required to enter their African ethnic group	
African ethnic	or background (for	
group or background?	example, "Nigerian", "Somali") in the box	
cachground.	provided.	

What is your Caribbean or Black ethnic group or background?	The respondent is required to enter their Caribbean or Black ethnic group or background (for	
	example, "Scottish Caribbean", "Black Scottish") in the box provided.	
Which one best describes your other ethnic group or	The respondent is required to select one option only.	Arab, Scottish Arab or British Arab  Other (for example, "Sikh", "Jewish")
background?	If the respondent selects "Other" they are required to enter their other ethnic group (for example, "Sikh", "Jewish") in the box provided.	
Which of these school (secondary or high school)	The respondent is required to select all options that apply.	O Grade, Standard Grade, National 3, 4 or 5, Intermediate 1 or 2, GCSE, CSE, or equivalent
qualifications do you have?		Higher, Advanced Higher, SCE Higher Grade, CSYS, A Level, AS Level or equivalent
		Other school qualifications not already mentioned (including foreign qualifications) or
		No school qualifications
Have you completed a Registered	The respondent is required to select all options that apply.	No or Yes, trade or equivalent
Apprenticeship?		Yes, Foundation or equivalent
		Yes, Modern or equivalent
		Yes, Graduate or equivalent
Which of these Further Education,	The respondent is required to select all options that apply.	GSVQ Foundation or Intermediate, SVQ level 1 or 2, SCOTVEC Module, City and Guilds Craft or equivalent
Higher Education or professional qualifications do you have?		GSVQ Advanced, SVQ level 3, ONC, OND, SCOTVEC National Diploma, City and Guilds Advanced Craft or equivalent
you nave!		HNC, HND, SVQ level 4 or equivalent

		Other post-school but pre-Higher Education qualifications not already mentioned (including foreign qualifications)  Degree, Postgraduate qualifications, Masters, PhD, SVQ level 5 or equivalent
		Professional qualifications (for example, teaching, nursing, accountancy)
		Other Higher Education qualifications not already mentioned (including foreign qualifications) or
		No Further Education, Higher Education, or professional qualifications
Have you previously served	If the respondent is a current serving	No or
in the UK Armed Forces?	member they should only select 'No'.	Yes, previously served in Regular Armed Forces
	The respondent is required to select all options that apply.	Yes, previously served in Reserve Armed Forces
In the last seven	The respondent is	Working as an employee
days, were you doing any of the	required to include casual or temporary work, even if only for one hour.	Self-employed or freelance
following?		Temporarily away from work ill, on holiday or temporarily laid off
		On maternity or paternity leave
	The respondent is required to select all	Doing any other kind of paid work or
	options that apply.	None of the above
Which of the	The respondent is	Retired (whether receiving a pension or not)
following describes what	required to select all options that apply.	Studying
you were doing	options that uppry.	Looking after home or family
in the last seven days?		Long-term sick or disabled
		Other
In the last four	The respondent is	Yes
weeks, were you actively looking for any kind of paid work?	required to select one option only.	No
If a job became available now,	The respondent is required to select one	Yes
could you start it within two weeks?	option only.	No
	l .	

In the last seven days, were you waiting to start a job already accepted?	The respondent is required to select one option only.		Yes No
Have you ever done any paid work?	The respondent is required to select one option only.		Yes, in the last 12 months  Yes, but not in the last 12 months  No, have never worked
In your main job, what is (was) your employment status?	The respondent is required to answer this question for their main job, or, if not working, their last main job. The respondent's main job is the job in which they usually work (worked) the most hours.  The respondent is required to select one option only.		Self-employed or freelance without employees Self-employed with employees
What is (was) the name of the organisation or business you work (worked) for?	The respondent is required to answer this question for their main job, or, if not working, their last main job. The respondent's main job is the job in which they usually work (worked) the most hours.  If the respondent is (was) self-employed in their own business, they are required to provide the business name.	or	No organisation or work (worked) for a private individual

XX71	TD1 1	
What is (was)	The respondent is	
your full job	required to answer	
title?	this question for their	
	main job, or, if not	
	working, their last	
	main job. The	
	respondent's main	
	job is the job in	
	which they usually	
	work (worked) the	
	most hours.	
	For example, "Retail	
	Assistant", "Office	
	Cleaner", "District	
	Nurse", "Primary	
	School Teacher".	
	The respondent is not	
	required to state their	
	grade or pay band	
Briefly describe	The respondent is	
what you do (did)	required to answer	
in your main job.	this question for their	
	main job, or, if not	
	working, their last	
	main job. The	
	respondent's main	
	job is the job in	
	which they usually	
	work (worked) the	
	most hours.	
What is (was) the	The respondent is	
main activity of	required to answer	
your	this question for their	
organisation,	main job, or, if not	
business or	working, their last	
freelance work?	main job. The	
	respondent's main	
	job is the job in	
	which they usually	
	work (worked) the	
	most hours.	
	Ì	

	For example, "Armed Forces", "Women's Clothing Retailer", "Hospital", "Primary Education", "Fish Wholesaler"  If the respondent is (was) a civil servant, they are required to write "Government" and give the name of their department. For example, "Marine Scotland".  If the respondent is (was) a local government officer, they are required to write "Local Government" and give the name of their department. For example, "Social Services", "Transport Department".			
Do (did) you supervise or oversee the work of other employees on a day-to-day basis?	The respondent is required to answer this question for their main job, or, if not working, their last main job. The respondent's main job is the job in which they usually work (worked) the most hours.  The respondent is required to select one option only.	Yes No		

In your main job, how many hours a week do (did) you usually work?	The respondent is required to answer this question for their main job, or, if not working, their last main job. The respondent's main job is the job in which they usually work (worked) the most hours.  The respondent is required to include paid and unpaid overtime  The respondent is required to select one option only.	0 to 15 16 to 30 31 to 48 49 or more
Which do you spend more time doing?	The respondent is required to select one option only.	Working Studying
Which do you spend more time doing?	The respondent is required to select one option only.	Working Studying Neither, I don't work or study
What address do you travel to for your main job?	If the respondent reports to a depot, they are required to provide the depot address  The respondent is required to select one option only.	Work mainly at, or from, [address]  No fixed place  Work on an offshore installation  Another address  Work outside the UK

What address do you travel to for	The respondent is required to select	Distance learning, home schooled or equivalent
your course of study (including	one option only.	Another address
school)?		Work outside the UK
How do you usually travel to	The respondent is required to answer	Driving a car or van
your main job?	for their usual travel	Passenger in a car or van
	to the place where they spend the most	Taxi or private hire
	time.	Motorcycle, scooter or moped
	The respondent is	On foot
	required to select the option for the	Bicycle
	longest part of their journey by distance.	Bus, minibus or coach
	The respondent is	Train
	required to select one option only.	Underground, subway, or tram
	, , , , , , , , , , , , , , , , , , ,	Other
How do you usually travel to	The respondent is required to answer	Driving a car or van
your course of	for their usual travel	Passenger in a car or van
study (including school)?	to the place where they spend the most time.	Taxi or private hire
		Motorcycle, scooter or moped
	The respondent is required to select the	On foot
	option for the	Bicycle
	longest part of their journey by distance.	Bus, minibus or coach
	The respondent is required to select	Train
	one option only.	Underground, subway, or tram
		Other

## SCHEDULE 3

Regulation 3(16)

# Electronic Questionnaire – Communal Establishment

(1)	(2)	(3)
Question	Instruction for respondent	Response options
Identify all usual residents and visitors to your establishment	The respondent is required to enter the number of usual residents and the number of visitors in the boxes provided.	
What is the nature of this establishment?	The respondent is required to select one option only.	<ul> <li>Medical and care (including care homes, children's homes or hospitals)</li> <li>Education (including halls of residence / student accommodation or schools)</li> <li>Armed Forces (Defence establishment, including ships)</li> <li>Detention (including prisons)</li> <li>Travel (including hotels, B&amp;B's, youth hostels or other travel establishments)</li> <li>Hostel or shelter (including shelters for the homeless)</li> <li>Other (including religious establishments or staff / worker accommodation)</li> </ul>
What is the nature of this medical or care establishment?	The respondent is required to select one option only.	<ul> <li>☐ General hospital</li> <li>☐ Mental health hospital (including inpatient units)</li> <li>☐ Other hospital</li> <li>☐ Care home without nursing</li> <li>☐ Care home with nursing</li> <li>☐ Children's home</li> <li>☐ Other medical and care establishment</li> </ul>
What is the nature of this education establishment?	The respondent is required to select one option only.	School Halls of residence / student accommodation Other educational establishment
What is the nature of this detention establishment?	The respondent is required to select one option only.	Prison or young offenders' institution Immigration removal centre
What is the nature of this travel establishment?	The respondent is required to select one option only.	Hotel, guest house, B&B, youth hostel Leisure / holiday establishment Other travel establishment

What is the nature	The respondent is	Hostel or shelter for the homeless		
of this hostel or shelter	required to select one option only.	Other hostel or shelter establishment		
establishment?	Trans. J.			
What is the nature	The respondent is	Religious establishment		
of this other establishment?	required to select one option only.	Staff / worker accommodation only		
establishment.	option only.	Other establishment		
How many	The respondent is	0 to 15 years old		
residents usually reside at this	required to enter the number of females and	16 to 24 years old		
establishment in	the number of males in	25 to 34 years old		
each of the age ranges below?	each age range in the boxes provided.	35 to 49 years old		
Tunges core w	provided.	50 to 64 years old		
		65 years old and over		
	If there are no			
	residents, the respondent is required			
	to enter 0 (zero) in the			
	boxes provided.			
Who is	The respondent is	NHS		
responsible for the management	required to select one option only.	Local authority		
of this	option only.	Government department or agency		
establishment?		Registered social landlord or housing		
		association Charity or voluntary organisation		
		Private owner or company		
		Higher or further education institution		
		Other		

# Electronic Questionnaire - Communal Establishment - Individual Questions

(1)	(2)	(3)		
Question	Instruction for respondent	Respo	nse options	
Do you (or the person you are filling this in for) stay here because you are:	The respondent is required to select one option only.		A resident (for example, patient, student, member of Armed Forces)? A member of staff or the owner? A family member, or partner, of a member of staff or the owner?	
What is your date of birth?	The respondent is required to use the format DD MM YYYY in the boxes provided.			
What is your sex?	The respondent is required to select one option only.		Female Male	
	A voluntary question about trans status or history will follow if the respondent is aged 16 or over.			
Do you consider yourself to be trans, or have a	This question is voluntary.		No	
trans history?	Trans is a term used to describe people whose gender is not the same as the sex they were registered at birth.		Yes, please describe your trans status (for example, non-binary, trans man, trans woman)	
	If the respondent chooses to respond to this question they are required to select one option only.			
	If the respondent selects "yes" to this question they may type how they describe their trans status in the box provided, for example, non-binary, trans man, trans woman.			

On 21 March 2021, what is	The respondent is required to select one	Never married and never registered in a civil partnership
your legal marital or registered civil	option only.	Married
partnership status?		In a registered civil partnership
		Separated, but still legally married
		Separated, but still legally in a civil partnership
		Divorced
		Formerly in a civil partnership which is now legally dissolved
		Widowed
		Surviving partner from a civil partnership
Are you a	The respondent is	Yes
schoolchild or student in full- time education?	required to select one option only.	No
During term-	The respondent is	Yes
time, do you live at [address]?	required to select one option only.	No, during term-time I live at another address
Which of the following best	This question is voluntary.	Straight or Heterosexual
describes your sexual	If the respondent	Gay or Lesbian
orientation?	chooses to respond to this question they are required to select one option only.	Bisexual
		Other sexual orientation
	If the respondent selects "Other sexual orientation" they may type how they describe their sexual orientation in the box provided.	

What is your	The respondent is	Scotland
country of birth?	required to select one option only.	England
		Northern Ireland
		Wales
		Republic of Ireland
		Elsewhere
If you were not born in the United Kingdom, when did you most recently arrive to live here?	The respondent is not required to count short visits away from the UK.  The respondent is required to use the format MM YYYY in the boxes provided.	
One year ago,	If the respondent had	[Address]
what was your usual address?	no usual address one year ago, they are required to enter the	Student term-time / boarding school address in the UK
	address where they	Another address in the UK
	were staying on 21 March 2020 in the box provided.	Outside the UK
	The respondent is required to select one option only.	
Do you look	The respondent is not	No
after, or give any help or support to	required to count anything they do as	Yes, 1 to 19 hours a week
family members,	part of their paid	Yes, 20 to 34 hours a week
friends, neighbours or	employment.	Yes, 35 to 49 hours a week
others because of either:	The respondent is required to select one	Yes, 50 or more hours a week
<ul> <li>long term physical / mental ill-health / disability; or problems related to old age?</li> </ul>	option only.	

		<ul> <li>I write English—</li> <li>Very well</li> <li>Well</li> <li>Not well</li> <li>Not at all</li> </ul>
understand, r	The respondent is required to select all options that apply.	<ul> <li>Understand spoken Scottish Gaelic</li> <li>Speak Scottish Gaelic</li> <li>Read Scottish Gaelic</li> <li>Write Scottish Gaelic</li> <li>or</li> <li>No skills in Scottish Gaelic</li> </ul>
understand, r	The respondent is required to select all options that apply.	<ul> <li>Understand spoken Scots</li> <li>Speak Scots</li> <li>Read Scots</li> <li>Write Scots</li> <li>or</li> <li>No skills in Scots</li> </ul>
British Sign r Language (BSL)? of What is your main language?	The respondent is required to select one option only.  The respondent is required to select one option only.	<ul> <li>Yes</li> <li>No</li> <li>English</li> <li>Other (including BSL and Tactile BSL)</li> </ul>

How is your	The respondent is	Very good
	required to select one option only.	Good
		Fair
		Bad
		Very bad
Do you have any	The respondent is required to select all options that apply.	Deafness or partial hearing loss
of the following, which have		Blindness or partial sight loss
lasted, or are expected to last, at least 12 months?	If the respondent selects "Other condition" they may enter their condition.	Full or partial loss of voice or difficulty speaking: a condition that requires you to use equipment to speak
		Learning disability: a condition that you have had since childhood that affects the way you learn, understand information and
		communicate Learning difficulty: a specific learning condition that affects the way you learn and process information
		Developmental disorder: a condition that you have had since childhood which affects motor, cognitive, social and emotional skills, and speech and language
		Physical disability: a condition that substantially limits one or more basic physical activities such as walking, climbing
		stairs, lifting or carrying Mental health condition: a condition that affects your emotional, physical and mental wellbeing
		Long-term illness, disease or condition: a condition, not listed above, that you may have for life, which may be managed with treatment or medication
		Other condition or
		No condition
Are your day-to-	The respondent is	Yes, limited a lot
day activities limited because of a health problem or disability which has lasted, or is expected to last, at least 12 months?	required to include problems related to old age.  The respondent is required to select one option only.	Yes, limited a little
		No

What passports do you hold?	The respondent is required to select all options that apply.  If the respondent selects "Other" they are required to	United Kingdom  Ireland Other None
	enter their first passport and, if applicable, their second passport in the boxes provided.	
What religion, religious	This question is voluntary.	None
denomination or		Church of Scotland
body do you belong to?	If the respondent chooses to respond to this question they are required to select one option only.  If the respondent	Roman Catholic
		Other Christian
		Muslim
	selects "Other Christian" they	Hindu
	may enter their other Christian religion, religious denomination or body in the box provided.	Buddhist
		Sikh
		Jewish
		Pagan
	If the respondent selects "Muslim" they may enter their Muslim denomination or school in the box provided.	Another religion or body
	If the respondent selects "Another religion or body" they may enter their religion, religious denomination or body in the box provided.	

What do you feel is your national identity?	The respondent is required to select all options that apply.	Scottish
	If the respondent selects "Other" they are required to enter their national identity in the box provided.	English
		Northern Irish
		Welsh
		British
		Other
What is your ethnic group?	The respondent is required to select one option only.	White (including Gypsy, Traveller, Roma, Showman / Showwoman)
	The next question asks the respondent about their ethnic group in more detail.	Mixed or multiple ethnic groups (including any mixed or multiple ethnic groups)
		Asian, Scottish Asian or British Asian (including any Asian ethnic group)
		African, Scottish African or British African (including any African ethnic group)
		Caribbean or Black (including Scottish Caribbean, Black Scottish)
		Other ethnic group (any other ethnic group, including Arab, Sikh, Jewish)
Which one best describes your white ethnic group or background?  If the respondent is required to select one option only.  If the respondent selects "Other" they are required to enter their other white ethnic group in the box provided.		Scottish
	Other British	
	selects "Other" they are required to enter their other white ethnic group in the box	Irish
		Polish
		Gypsy / Traveller
		Roma
		Showman / Showwoman
		Other white ethnic group
What are your mixed or multiple ethnic groups?	The respondent is required to provide their ethnic groups.	

Which one best describes your Asian, Scottish Asian or British Asian ethnic group or background?	The respondent is required to select one option only.  If the respondent selects "Other" they are required to enter their other Asian ethnic group in the box provided.	Pakistani, Scottish Pakistani or British Pakistani Indian, Scottish Indian or British Indian Bangladeshi, Scottish Bangladeshi or British Bangladeshi Chinese, Scottish Chinese or British Chinese Other
What is your African, Scottish African or British African ethnic group or background?	The respondent is required to enter their African ethnic group or background (for example, "Nigerian", "Somali") in the box provided.	
What is your Caribbean or Black ethnic group or background?	The respondent is required to enter their Caribbean or Black ethnic group or background (for example, "Scottish Caribbean", "Black Scottish") in the box provided.	
Which one best describes your other ethnic group or background?	The respondent is required to select one option only.  If the respondent selects "Other" they are required to enter their other ethnic group (for example, "Sikh", "Jewish") in the box provided.	Arab, Scottish Arab or British Arab  Other (for example, "Sikh", "Jewish")
Which of these school (secondary or high school) qualifications do you have?	The respondent is required to select all options that apply.	O Grade, Standard Grade, National 3, 4 or 5, Intermediate 1 or 2, GCSE, CSE, or equivalent Higher, Advanced Higher, SCE Higher Grade, CSYS, A Level, AS Level or equivalent Other school qualifications not already mentioned (including foreign qualifications) or No school qualifications

Have you completed a	The respondent is required to select	No or
Registered Apprenticeship?	all options that	Yes, trade or equivalent
	apply.	Yes, Foundation or equivalent
		Yes, Modern or equivalent
		Yes, Graduate or equivalent
Which of these Further Education, Higher Education or professional qualifications do	The respondent is required to select all options that	GSVQ Foundation or Intermediate, SVQ level 1 or 2, SCOTVEC Module, City and Guilds Craft or equivalent
	apply.	GSVQ Advanced, SVQ level 3, ONC, OND, SCOTVEC National Diploma, City and Guilds Advanced Craft or equivalent
you have?		HNC, HND, SVQ level 4 or equivalent
		Other post-school but pre-Higher Education qualifications not already mentioned (including foreign qualifications)
		Degree, Postgraduate qualifications, Masters, PhD, SVQ level 5 or equivalent
		Professional qualifications (for example, teaching, nursing, accountancy)
		Other Higher Education qualifications not already mentioned (including foreign qualifications) or
		No Further Education, Higher Education, or professional qualifications
Have you previously served in the UK Armed Forces?  If the respondent is a current serving member they should only select 'No'.		No or
	Yes, previously served in Regular Armed Forces	
	The respondent is required to select all options that apply.	Yes, previously served in Reserve Armed Forces
In the last seven days, were you doing any of the following?	The respondent is required to include casual or temporary work, even if only for one hour.	Working as an employee
		Self-employed or freelance
		Temporarily away from work ill, on holiday or temporarily laid off
	The respondent is required to select all options that apply.	On maternity or paternity leave
		Doing any other kind of paid work or
		None of the above

Which of the following describes what you were doing in the last seven days?  In the last four weeks, were you actively looking	The respondent is required to select all options that apply.  The respondent is required to select one option only.	Retired (whether receiving a pension or not)  Studying  Looking after home or family  Long-term sick or disabled  Other  Yes  No
for any kind of paid work?		
If a job became available now, could you start it within two weeks?	The respondent is required to select one option only.	Yes No
In the last seven days, were you waiting to start a job already accepted?	The respondent is required to select one option only.	Yes No
Have you ever done any paid work?	The respondent is required to select one option only.	Yes, in the last 12 months  Yes, but not in the last 12 months  No, have never worked
what is (was) your employment status?  requir this quantities quan	The respondent is required to answer this question for their main job, or,	Employee
		Self-employed or freelance without employees
	if not working, their last main job. The respondent's main job is the job in which they usually work (worked) the most hours.	Self-employed with employees
	The respondent is required to select one option only.	

What is (was) the name of the organisation or business you work (worked) for?	The respondent is required to answer this question for their main job, or, if not working, their last main job. The respondent's main job is the job in which they usually work (worked) the most hours.	or	No organisation or work (worked) for a private individual
	If the respondent is (was) self- employed in their own business, they are required to provide the business name.		
What is (was) your full job title?	The respondent is required to answer this question for their main job, or, if not working, their last main job. The respondent's main job is the job in which they usually work (worked) the most hours		
	For example, "Retail Assistant", "Office Cleaner", "District Nurse", "Primary School Teacher".		
	The respondent is not required to state their grade or pay band.		

Briefly describe	The respondent is	
what you do (did)	required to answer	
in your main job.	this question for	
	their main job, or,	
	if not working,	
	their last main job.	
	The respondent's	
	main job is the job	
	in which they	
	usually work	
	(worked) the most	
	hours.	
What is (was) the	The respondent is	
main activity of	required to answer	
-	this question for	
your	-	
organisation,	their main job, or,	
business or	if not working,	
freelance work?	their last main job.	
	The respondent's	
	main job is the job	
	in which they	
	usually work	
	(worked) the most	
	hours.	
	110 410	
	For example,	
	"Armed Forces",	
	"Women's Clothing	
	Retailer",	
	"Hospital",	
	"Primary	
	Education", "Fish	
	Wholesaler".	
	TC .1 1	
	If the respondent is	
	(was) a civil	
	servant, they are	
	required to write	
	"Government" and	
	provide the name	
	of their department.	
	For example,	
	"Marine Scotland".	
	If the respondent is	
	(was) a local	
	government officer,	
	they are required to	
	write "Local	
	Government" and	
	provide the name	
	-	
	of their department.	
	For example,	
	"Social Services",	
	"Transport	
	Department".	

Do (did) you supervise or oversee the work of other employees on a day-to-day basis?	The respondent is required to answer this question for their main job, or, if not working, their last main job. The respondent's main job is the job in which they usually work (worked) the most hours.	Yes No
	The respondent is required to select one option only.	
In your main job, how many hours a week do (did) you usually work?	The respondent is required to answer this question for their main job, or, if not working, their last main job. The respondent's main job is the job in which they usually work (worked) the most hours.  The respondent is required to include paid and unpaid overtime.  The respondent is required to select one option only.	0 to 15 16 to 30 31 to 48 49 or more
Which do you spend more time doing?	The respondent is required to select one option only.	Working Studying
Which do you spend more time doing?	The respondent is required to select one option only.	Working Studying Neither, I don't work or study

What address do you travel to for your main job?  What address do you travel to for your course of	If the respondent reports to a depot, they are required to give the depot address.  The respondent is required to select one option only.  The respondent is required to select one option only.	Work mainly at, or from, [address]  No fixed place  Work on an offshore installation  Another address  Work outside the UK  Distance learning, home schooled or equivalent  Another address
study (including school)?  How do you usually travel to your main job?	The respondent is required to answer for their usual travel to the place where they spend the most time.  The respondent is required to select the option for the longest part of their journey by	Work outside the UK  Driving a car or van  Passenger in a car or van  Taxi or private hire  Motorcycle, scooter or moped  On foot  Bicycle  Bus, minibus or coach  Train  Underground, subway, or tram
How do you usually travel to your course of study (including school)?	distance.  The respondent is required to select one option only.  The respondent is required to answer for their usual travel to the place where they spend the most time.  The respondent is required to select the option for the longest part of their journey by distance.  The respondent is required to select one option only.	Other  Driving a car or van Passenger in a car or van Taxi or private hire Motorcycle, scooter or moped On foot Bicycle Bus, minibus or coach Train Underground, subway, or tram Other

# Paper Household Questionnaire



Household Questionnaire (HO)

# 21 March 2021

Scotland's Census 2021  Scotland's Census is the official count of every person and household in the country.  The census is held every ten years and the answers you give to the questions will help shape Scotland's future public services.  What we would like you to do Please complete this questionnaire on paper or online at www.census.gov.scot  You should provide information that is correct as of Sunday, 21 March 2021.  A census questionnaire must be completed for every household in Scotland.  As a householder, you have a legal responsibility to complete this questionnaire. You may be prosecuted if you refuse to complete the questionnaire, provide a false answer to a question, or if you sign a false document. In some cases, you may receive a criminal record and fine.  The questions about trans status or history, sexual orientation, and religion are voluntary. You do not have to answer these questions if you do not want to.  Our pledge to you  Your census return will be kept secure and will be kept confidential for 100 years.  Completing online  You can complete this questionnaire online. Visit www.census.gov.scot and use the code below.  Your lnternet Access Code:  Help and support  The leaflet included has more information about how we can help and support you to complete the census questionnaire.  You can also visit www.census.gov.scot or more help or call our helpline FREEPHONE 0800 030 8308.  Declaration  The information provided in this questionnaire is full and accurate, as far as I know.  Signature(s)			If there is a <b>mistake</b> in the printed address, please write your correct address below:  Postcode
www.census.gov.scot and use the code below.  The census is held every ten years and the answers you give to the questions will help shape Scotland's future public services.  What we would like you to do Please complete this questionnaire on paper or online at www.census.gov.scot You should provide information that is correct as of Sunday, 21 March 2021.  A census questionnaire must be completed for every household in Scotland.  As a householder, you have a legal responsibility to complete this questionnaire. You may be prosecuted if you refuse to complete the questionn, or if you sign a false document. In some cases, you may receive a criminal record and fine.  The questions about trans status or history, sexual orientation, and religion are voluntary. You do not have to answer these questions if you do not want to.  Our pledge to you Your census return will be kept secure and will be kept confidential for 100 years.  Www.census.gov.scot and use the code below.  Your Internet Access Code:  Help and support  The leaflet included has more information about how we can help and support you to complete the census questionnaire.  You can also visit www.census.gov.scot for more help or call our helpline FREEPHONE  Declaration  The information provided in this questionnaire is full and accurate, as far as I know.  Signature(s)		Scotland's Census 2021	Completing online
answers you give to the questions will help shape Scotland's future public services.  What we would like you to do Please complete this questionnaire on paper or online at www.census.gov.scot You should provide information that is correct as of Sunday, 21 March 2021.  A census questionnaire must be completed for every household in Scotland.  As a householder, you have a legal responsibility to complete this questionnaire. You may be prosecuted if you refuse to complete the questionnaire if you refuse to complete the questionnaire, or if you sign a false document. In some cases, you may receive a criminal record and fine.  The questions about trans status or history, sexual orientation, and religion are voluntary. You do not have to answer these questions if you do not want to.  Our pledge to you Your census return will be kept secure and will be kept confidential for 100 years.  Polare  Your Internet Access Code:			
Please complete this questionnaire on paper or online at www.census.gov.scot  You should provide information that is correct as of Sunday, 21 March 2021.  A census questionnaire must be completed for every household in Scotland.  As a householder, you have a legal responsibility to complete this questionnaire. You may be prosecuted if you refuse to complete the questionnaire, provide a false answer to a question, or if you sign a false document. In some cases, you may receive a criminal record and fine.  The questions about trans status or history, sexual orientation, and religion are voluntary. You do not have to answer these questions if you do not want to.  Our pledge to you  Your census return will be kept secure and will be kept confidential for 100 years.  Help and support  The leaflet included has more information about how we can help and support you to complete the census questionnaire.  You can also visit www.census.gov.scot for more help or call our helpline FREEPHONE 0800 030 8308.  Declaration  The information provided in this questionnaire is full and accurate, as far as I know.  Signature(s)		answers you give to the questions will help shape	Your Internet Access Code:
online at www.census.gov.scot You should provide information that is correct as of Sunday, 21 March 2021.  A census questionnaire must be completed for every household in Scotland.  As a householder, you have a legal responsibility to complete this questionnaire. You may be prosecuted if you refuse to complete the questionnaire, provide a false answer to a question, or if you sign a false document. In some cases, you may receive a criminal record and fine.  The questions about trans status or history, sexual orientation, and religion are voluntary. You do not have to answer these questions if you do not want to.  Our pledge to you Your census return will be kept secure and will be kept confidential for 100 years.  Help and support  The leaflet included has more information about how we can help and support you to complete the census questionnaire.  You can also visit www.census.gov.scot for more help or call our helpline FREEPHONE 0800 030 8308.  Declaration  The information provided in this questionnaire is full and accurate, as far as I know.  Signature(s)		•	
of Sunday, 21 March 2021.  A census questionnaire must be completed for every household in Scotland.  As a householder, you have a legal responsibility to complete this questionnaire. You may be prosecuted if you refuse to complete the questionnaire, provide a false answer to a question, or if you sign a false document. In some cases, you may receive a criminal record and fine.  The questions about trans status or history, sexual orientation, and religion are voluntary. You do not have to answer these questions if you do not want to.  Our pledge to you  Your census return will be kept secure and will be kept confidential for 100 years.  Help and support  The leaflet included has more information about how we can help and support you to complete the census questionnaire.  You can also visit www.census.gov.scot for more help or call our helpline FREEPHONE 0800 030 8308.  Declaration  The information provided in this questionnaire is full and accurate, as far as I know.  Signature(s)			
A census questionnaire must be completed for every household in Scotland.  As a householder, you have a legal responsibility to complete this questionnaire. You may be prosecuted if you refuse to complete the questionnaire, provide a false answer to a question, or if you sign a false document. In some cases, you may receive a criminal record and fine.  The questions about trans status or history, sexual orientation, and religion are voluntary. You do not have to answer these questions if you do not have to answer these questions if you do not want to.  Our pledge to you  Your census return will be kept secure and will be kept confidential for 100 years.  The leaflet included has more information about how we can help and support you to complete the census questionnaire.  You can also visit www.census.gov.scot for more help or call our helpline FREEPHONE 0800 030 8308.  Declaration  The information provided in this questionnaire is full and accurate, as far as I know.  Signature(s)		You should provide information that is correct as of Sunday, 21 March 2021.	[Halp and surrount
As a householder, you have a legal responsibility to complete this questionnaire. You may be prosecuted if you refuse to complete the questionnaire, provide a false answer to a question, or if you sign a false document. In some cases, you may receive a criminal record and fine.  The questions about trans status or history, sexual orientation, and religion are voluntary. You do not have to answer these questions if you do not want to.  Our pledge to you  Your census return will be kept secure and will be kept confidential for 100 years.  how we can help and support you to complete the census questionnaire.  You can also visit www.census.gov.scot for more help or call our helpline FREEPHONE 0800 030 8308.  Declaration  The information provided in this questionnaire is full and accurate, as far as I know.  Signature(s)			
questionnaire, provide a false answer to a question, or if you sign a false document. In some cases, you may receive a criminal record and fine.  The questions about trans status or history, sexual orientation, and religion are voluntary. You do not have to answer these questions if you do not want to.  Our pledge to you  Your census return will be kept secure and will be kept confidential for 100 years.  You can also visit www.census.gov.scot for more help or call our helpline FREEPHONE 0800 030 8308.  You can also visit www.census.gov.scot for more help or call our helpline FREEPHONE 0800 030 8308.  Signature(s)		to complete this questionnaire. You may be	how we can help and support you to complete the
sexual orientation, and religion are voluntary. You do not have to answer these questions if you do not want to.  Our pledge to you  Your census return will be kept secure and will be kept confidential for 100 years.  Declaration  The information provided in this questionnaire is full and accurate, as far as I know.  Signature(s)		questionnaire, provide a false answer to a question, or if you sign a false document. In some cases, you may receive a criminal record and	more help or call our helpline FREEPHONE
do not have to answer these questions if you do not want to.  Our pledge to you  Your census return will be kept secure and will be kept confidential for 100 years.  Declaration  The information provided in this questionnaire is full and accurate, as far as I know.  Signature(s)			
Your census return will be kept secure and will be kept confidential for 100 years.  Signature(s)		do not have to answer these questions if you do	
Your census return will be kept secure and will be kept confidential for 100 years.  Signature(s)		Our pledge to you	The information provided in this questionnaire is full and accurate, as far as I know.
January Control of the Control of th			O'control (c)
Date			Signature(s)
Date		6-	
T FAULT OWE REDISITAL GENERAL OF SCOURING TO THE TOTAL CONTROL OF THE TO	0	Paul Lowe, Registrar General for Scotland	Date
Thank you for helping to shape Scotland's future	HOV1.		

<b>Important</b>	quidance —	before v	ou start
------------------	------------	----------	----------

## Who should fill in this questionnaire

It is the responsibility of the householder to complete the census questionnaire and post it back in the pre-paid envelope.

The householder or joint householder is the person, resident or present at the address, who:

- owns / rents (or jointly owns / rents) the accommodation and / or
- is responsible (or jointly responsible) for paying the household bills and expenses

#### A household is:

- · one person living alone, or
- a group of people (not necessarily related) living at the same address who share cooking facilities and share a living room or sitting room or dining area

If there is more than one household at this address, please see the extra questionnaires section below.

### Extra questionnaires

Individual Questionnaire – any member of your household who is aged 16 or over can ask for an Individual Questionnaire online at www.census.gov.scot or by calling our helpline FREEPHONE 0800 030 8308. They can use this if they do not want to reveal their information to others in the household. Remember to include these people in household questions H1 to H6 on this questionnaire. Individual questions 1 to 44 for these people should be left blank.

**Household Questionnaire** – if there is more than one household at this address, each household will need to complete a separate questionnaire either online or on paper. If you need one or more extra Household Questionnaires, you can order these by calling our helpline FREEPHONE 0800 030 8308.

**Continuation Questionnaire** – if there are more than five people in the household, please fill in this questionnaire and a Continuation Questionnaire(s). If you need to order one or more Continuation Questionnaires, you can order these by calling our helpline FREEPHONE 0800 030 8308.

# How to fill in this questionnaire This questionnaire will be scanned by a computer. To make sure we record your answers correctly, follow the instructions below.

Please:

- · use a black ink ballpoint pen
- tick your answers within the box like this:
- print your answers, in English, within the boxes like this: SMITH
- use capital letters one per box
- correct any mistakes like this: 

   or SM

   ITH

   IT
- if a word will not fit on one line, continue on to the next line like this, if possible:

1	3	0	L	Α	D	У	W	Е	L	L	С	R	Е	S	С
Е	Ν	Т													

DO NOT draw a line through questions or pages. The computer may mistake this for an answer.

- 1	H	ousehold questions — people					
	H1 *	Who usually lives here? If you need more advice about who to include, see the extra guidance leaflet or contact us Tick all that apply					
		Me, this is my permanent or family home					
		Family members including partners, children and babies born on or before 21 March 2021					
		Students and / or schoolchildren who live away from home during term-time					
		Housemates / flatmates or lodgers					
	People who work away from home within the UK, or are members of the Armed Forces, if this is their permanent or family home						
		People staying temporarily who usually live in the UK but do not have another UK address					
		People who usually live outside the UK who are staying in the UK for 6 months or more					
		People temporarily away from home on the night of 21 March 2021					
1	H2	Counting everyone you included in question H1, how many people usually live here?					
	П						
(	H3	Starting with the householder(s), list the names of the people counted in question H2,					
	110	including children and babies.					
	Dor	First name(s)  Last name  son 1					
		son 2					
		rson 3					
		son 4					
	Pers	son 5					
	•	If there are more than five people in this household, either fill in the questionnaire online for the whole household or call our helpline FREEPHONE 0800 030 8308 to ask for a Continuation Questionnaire(s)					
	H4						
	•	family home is elsewhere?  Do not include anyone counted in question H2					
	*	Tick <b>all</b> that apply					
		People staying here because it is their second address, for example, for work or a holiday home. Their permanent or family home is elsewhere					
		People who usually live somewhere else in the UK, for example, boy / girlfriends, friends, relatives					
		People who usually live outside the UK who are staying in the UK for less than 6 months					
		People here on holiday					
		No-one else is staying at this address on the night of 21 March 2021 → go to H6					
	H5	Counting only the people you included in question H4, how many people are staying at this address on the night of 21 March 2021 whose permanent or family home is elsewhere?					
		<b>➡</b> Details for these people must be recorded on the back page					
HOv1.0	*	If there are <b>only</b> people staying at this address on the night of 21 March 2021 whose permanent or family home is elsewhere, please make sure you answer questions <b>H7</b> to <b>H10</b> on <b>page 6</b> and questions <b>V1</b> to <b>V4</b> on the back page					
		Page_3					

Household questions — relati	onships		$\neg$
H6 How are the members of this house  If there are more than five people, conta  If you live alone   go to H7  If no-one usually lives here and there ar  go to H7	ct us to request a Continuation	on Questionnaire(s)	
This shows how to provide relationship information for Mary Smith, who is Person 1, her husband (Robert), their two children (Alison and Steven), and Robert's father (James)  DO NOT write in this section  Write your household members' details in the	me(s)  Y	Name of Person 2 First name(s)  ROBERT  Last name  SMITH  Relationship of Person 2 to Person:  Husband or wife  Registered civil partner  Partner	1
section BELOW		Son or daughter Step-child Brother or sister	
used in question H3 (on page 3), write the name of everyone who usually lives here at the top of each column  Remember to include children, babies and people who have requested an Individual Questionnaire  Tick a box to show the relationship of each person to each of the other	in name of Person 1 as in question H3	Relationship of Person 2 to Person: Husband or wife Registered civil partner Son or daughter Step-child Brother or sister Step-brother or step-sister Mother or father Step-mother or step-father Grandchild	1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
Page 4		Grandparent Other relation (including in-laws) Unrelated (including foster child)	HOV1.0

	Household ques	tions -	<ul><li>relationships</li></ul>	5	I
	<u> </u>				
	Name of Person 3 First name(s)		Name of Person 4 First name(s)		Name of Person 5 First name(s)
	ALISON		STEVEN		JAMES
	Last name	4.	Last name	4.	Last name
	SMITH		SMITH		SMITH
	Relationship of Person to Persons:	1 2	Relationship of Pers to Persons:	1 2 3	Relationship of Person 5 to Persons: 1 2 3 4
	Husband or wife		Husband or wife		Mother or father 🔲 🗹 🔲
	Registered <b>civil</b> partner		Registered <b>civil</b> partner		Step-mother or
	Partner		Partner		Grandchild
	Son or daughter		Son or daughter		Grandparent
	Step-child		Step-child		Other relation (including in-laws)
	Brother or sister		Brother or sister		Unrelated
	Name of Person 3	=	Name of Person 4		(including foster child)  Name of Person 5
	First name(s)		First name(s)		First name(s)
	Last name		Last name		Last name
	Relationship of Person to Persons:	<sup>3</sup> 1 2	Relationship of Pers to Persons:	son 4 1 2 3	Relationship of Person 5 to Persons: 1 2 3 4
	Husband or wife		Husband or wife		Husband or wife 🔲 🔲 🔲
	Registered civil partner		Registered civil partner		Registered civil
	Partner		Partner		Partner
	Son or daughter		Son or daughter		Son or daughter
	Step-child		Step-child		Step-child
	Brother or sister		Brother or sister		Brother or sister
	Step-brother or step-sister		Step-brother or step-sister		Step-brother or
	Mother or father		Mother or father		Mother or father
	Step-mother or step-father		Step-mother or step-father		Step-mother or
	Grandchild		Grandchild		Grandchild
	Grandparent		Grandparent		Grandparent
	Other relation (including in-laws)		Other relation (including in-laws)		Other relation
HOv1.0			100 NO.		

(117	ousehold questions — accommo	lation	- 1
-	What type of accommodation is this?	H11 If there is no-one usually living here but there are people staying at this address	
	detached	whose permanent or family home is elsewhere	
	semi-detached	details for these people must be recorded on the back page	
	terraced (including end-terrace)	If no one usually lives here and no one is	
□ A fi	at, maisonette, or apartment that is: in a tenement or purpose-built block of flats (including '4-in-a-block')	If no-one usually lives here and no-one is staying at this address on the night of 21 March 2021, there are no more question to answer	ns
	part of a converted or shared house (including bed-sits)	→ remember to sign the declaration on the front page	
	in a commercial building (for example, in an office building, hotel or over a shop)	H12 Does your household own or rent this accommodation?  Tick one box only	
A m	nobile or temporary structure:	Owns with a mortgage or loan ⇒ go to H14	
	a caravan or other mobile or temporary structure	Owns outright • qo to H14	
H8	Are all the rooms in this accommodation		
	behind a door that only this household can use?	Owns with shared equity (for example, LIFT, Help-to-Buy) → go to H14	
	Yes	Rents (with or without housing benefit)	
	No	Part owns and part rents (shared ownership)  go to H14	
H9	How many bedrooms are available for use only by this household?	Lives here rent free	
•	Include all rooms built or converted for use as		
	bedrooms	H13 Who is your landlord?	
	Number of bedrooms	H13 Who is your landlord?  Council (Local Authority) or Housing Association / Registered Social Landlord	
H10		Council (Local Authority) or Housing	
H10	Number of bedrooms  What type of central heating does this accommodation have?  Central heating is a central system that	Council (Local Authority) or Housing Association / Registered Social Landlord	
H10	Number of bedrooms  Number of central heating does this accommodation have?  Central heating is a central system that generates heat for multiple rooms  If the central heating is available please tick the	Council (Local Authority) or Housing Association / Registered Social Landlord  Private landlord or letting agency  Other	
H10	Number of bedrooms  O What type of central heating does this accommodation have?  Central heating is a central system that generates heat for multiple rooms  If the central heating is available please tick the box, whether you use it or not Tick all that apply	Council (Local Authority) or Housing Association / Registered Social Landlord Private landlord or letting agency Other  H14 In total, how many cars or vans are owned, or are available for use, by	
H10	Number of bedrooms  What type of central heating does this accommodation have? Central heating is a central system that generates heat for multiple rooms If the central heating is available please tick the box, whether you use it or not Tick all that apply  No central heating	Council (Local Authority) or Housing Association / Registered Social Landlord  Private landlord or letting agency Other  H14 In total, how many cars or vans are owned, or are available for use, by members of this household? Include any company car(s) or van(s) available	e
H10	Number of bedrooms  O What type of central heating does this accommodation have? Central heating is a central system that generates heat for multiple rooms If the central heating is available please tick the box, whether you use it or not Tick all that apply No central heating Mains gas	Council (Local Authority) or Housing Association / Registered Social Landlord Private landlord or letting agency Other  H14 In total, how many cars or vans are owned, or are available for use, by members of this household?	e
H10 + +	Number of bedrooms  What type of central heating does this accommodation have? Central heating is a central system that generates heat for multiple rooms If the central heating is available please tick the box, whether you use it or not Tick all that apply No central heating Mains gas Other gas (including liquid petroleum gas and biogas)	<ul> <li>Council (Local Authority) or Housing Association / Registered Social Landlord</li> <li>□ Private landlord or letting agency</li> <li>□ Other</li> <li>H14 In total, how many cars or vans are owned, or are available for use, by members of this household?</li> <li>◆ Include any company car(s) or van(s) available for private use</li> <li>□ None</li> </ul>	e
H10 + +	Number of bedrooms  What type of central heating does this accommodation have? Central heating is a central system that generates heat for multiple rooms If the central heating is available please tick the box, whether you use it or not Tick all that apply No central heating Mains gas Other gas (including liquid petroleum gas and	□ Council (Local Authority) or Housing Association / Registered Social Landlord     □ Private landlord or letting agency     □ Other  H14 In total, how many cars or vans are owned, or are available for use, by members of this household?     ◆ Include any company car(s) or van(s) available for private use	ele
H10 + +	Number of bedrooms  What type of central heating does this accommodation have? Central heating is a central system that generates heat for multiple rooms If the central heating is available please tick the box, whether you use it or not Tick all that apply No central heating Mains gas Other gas (including liquid petroleum gas and biogas) Electric (including storage heating) Oil	<ul> <li>Council (Local Authority) or Housing Association / Registered Social Landlord</li> <li>□ Private landlord or letting agency</li> <li>□ Other</li> <li>H14 In total, how many cars or vans are owned, or are available for use, by members of this household?</li> <li>◆ Include any company car(s) or van(s) available for private use</li> <li>□ None</li> </ul>	e
H10 + +	Number of bedrooms  O What type of central heating does this accommodation have? Central heating is a central system that generates heat for multiple rooms If the central heating is available please tick the box, whether you use it or not Tick all that apply No central heating Mains gas Other gas (including liquid petroleum gas and biogas) Electric (including storage heating) Oil Solid fuel (excluding wood)	Council (Local Authority) or Housing Association / Registered Social Landlord  Private landlord or letting agency  Other  H14 In total, how many cars or vans are owned, or are available for use, by members of this household?  Include any company car(s) or van(s) available for private use  None  1	e
H10 + +	Number of bedrooms  What type of central heating does this accommodation have? Central heating is a central system that generates heat for multiple rooms If the central heating is available please tick the box, whether you use it or not Tick all that apply No central heating Mains gas Other gas (including liquid petroleum gas and biogas) Electric (including storage heating) Oil Solid fuel (excluding wood) Wood or biomass (logs, pellets, chippings)	Council (Local Authority) or Housing Association / Registered Social Landlord  Private landlord or letting agency  Other  H14 In total, how many cars or vans are owned, or are available for use, by members of this household?  Include any company car(s) or van(s) available for private use  None  1  2	е
H10 + +	Number of bedrooms  O What type of central heating does this accommodation have? Central heating is a central system that generates heat for multiple rooms If the central heating is available please tick the box, whether you use it or not Tick all that apply No central heating Mains gas Other gas (including liquid petroleum gas and biogas) Electric (including storage heating) Oil Solid fuel (excluding wood)	Council (Local Authority) or Housing Association / Registered Social Landlord  Private landlord or letting agency  Other  H14 In total, how many cars or vans are owned, or are available for use, by members of this household?  Include any company car(s) or van(s) available for private use  None  1 2 3 4 or more, please write in number	
H10 + +	Number of bedrooms  What type of central heating does this accommodation have? Central heating is a central system that generates heat for multiple rooms If the central heating is available please tick the box, whether you use it or not Tick all that apply No central heating Mains gas Other gas (including liquid petroleum gas and biogas) Electric (including storage heating) Oil Solid fuel (excluding wood) Wood or biomass (logs, pellets, chippings) Other renewable energy source (including	Council (Local Authority) or Housing Association / Registered Social Landlord  Private landlord or letting agency  Other  H14 In total, how many cars or vans are owned, or are available for use, by members of this household?  Include any company car(s) or van(s) available for private use  None  1 2 3 4 or more, please write in number  H15 There are no more household questions	
H10 + +	Number of bedrooms  What type of central heating does this accommodation have? Central heating is a central system that generates heat for multiple rooms If the central heating is available please tick the box, whether you use it or not Tick all that apply No central heating Mains gas Other gas (including liquid petroleum gas and biogas) Electric (including storage heating) Oil Solid fuel (excluding wood) Wood or biomass (logs, pellets, chippings) Other renewable energy source (including electric and air heat pump systems)	Council (Local Authority) or Housing Association / Registered Social Landlord  Private landlord or letting agency  Other  H14 In total, how many cars or vans are owned, or are available for use, by members of this household?  Include any company car(s) or van(s) available for private use  None  1 2 3 4 or more, please write in number	

Individual questions — Person 1	I
1 What is your name? (Person 1 in H3 on page 3) First name(s) Last name	8 Which of the following best describes your sexual orientation?  ♦ This question is voluntary  ♦ Answer only if you are aged 16 or over  † Tick one box only
	Straight / Heterosexual
2 What is your date of birth?	Gay or Lesbian
Day Month Year	Bisexual
	Other sexual orientation, please write in:
3 What is your sex?	
☐ Female ☐ Male	9 What is your country of birth?
4 Do you consider yourself to be trans, or have a trans history?  ◆ This question is voluntary  ◆ Answer only if you are aged 16 or over  ◆ Trans is a term used to describe people whose gender is not the same as the sex they were registered at birth  ◆ Tick one box only	Scotland → go to 11 England → go to 11 Northern Ireland → go to 11 Wales → go to 11 Republic of Ireland
No	Elsewhere, please write in the current name of
Yes, please describe your trans status (for	the country:
example, non-binary, trans man, trans woman):	10 If you were not born in the United Kingdom,
5 On 21 March 2021, what is your legal	when did you most recently arrive to live here?
marital or registered civil partnership status?  Never married and never registered in a civil	♦ Do not count short visits away from the UK  Month Year
marital or registered civil partnership status?	♦ Do not count short visits away from the UK
marital or registered civil partnership status?  Never married and never registered in a civil partnership  Married  In a registered civil partnership	<ul> <li>Do not count short visits away from the UK</li> <li>Month Year</li> <li>11 One year ago, what was your usual address?</li> <li>If you had no usual address one year ago, state</li> </ul>
marital or registered civil partnership status?  Never married and never registered in a civil partnership  Married  In a registered civil partnership  Separated, but still legally married  Separated, but still legally in a civil partnership	◆ Do not count short visits away from the UK  Month Year      ☐    ☐    ☐    ☐    ☐    ☐    ☐
marital or registered civil partnership status?  Never married and never registered in a civil partnership  Married  In a registered civil partnership  Separated, but still legally married  Separated, but still legally in a civil partnership  Divorced  Formerly in a civil partnership which is now	◆ Do not count short visits away from the UK  Month Year      ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐
marital or registered civil partnership status?  Never married and never registered in a civil partnership  Married  In a registered civil partnership  Separated, but still legally married  Separated, but still legally in a civil partnership  Divorced  Formerly in a civil partnership which is now legally dissolved	◆ Do not count short visits away from the UK  Month Year      ☐    ☐    ☐    ☐    ☐    ☐    ☐
marital or registered civil partnership status?  Never married and never registered in a civil partnership  Married  In a registered civil partnership  Separated, but still legally married  Separated, but still legally in a civil partnership  Divorced  Formerly in a civil partnership which is now legally dissolved  Widowed	◆ Do not count short visits away from the UK  Month Year      ☐    ☐    ☐    ☐    ☐    ☐    ☐
marital or registered civil partnership status?  Never married and never registered in a civil partnership  Married  In a registered civil partnership  Separated, but still legally married  Separated, but still legally in a civil partnership  Divorced  Formerly in a civil partnership which is now legally dissolved  Widowed  Surviving partner from a civil partnership	◆ Do not count short visits away from the UK  Month Year      ☐    ☐    ☐    ☐    ☐    ☐    ☐
marital or registered civil partnership status?  Never married and never registered in a civil partnership  Married  In a registered civil partnership  Separated, but still legally married  Separated, but still legally in a civil partnership  Divorced  Formerly in a civil partnership which is now legally dissolved  Widowed  Surviving partner from a civil partnership  Are you a schoolchild or student in full-time education?	◆ Do not count short visits away from the UK  Month Year      ☐    ☐    ☐    ☐    ☐    ☐    ☐
marital or registered civil partnership status?  Never married and never registered in a civil partnership  Married  In a registered civil partnership  Separated, but still legally married  Separated, but still legally in a civil partnership  Divorced  Formerly in a civil partnership which is now legally dissolved  Widowed  Surviving partner from a civil partnership  Are you a schoolchild or student in full-time education?  Yes	◆ Do not count short visits away from the UK  Month Year      ☐    ☐    ☐    ☐    ☐    ☐    ☐
marital or registered civil partnership status?  Never married and never registered in a civil partnership  Married  In a registered civil partnership  Separated, but still legally married  Separated, but still legally in a civil partnership  Divorced  Formerly in a civil partnership which is now legally dissolved  Widowed  Surviving partner from a civil partnership  Are you a schoolchild or student in full-time education?  Yes  No   go to 8  7 During term-time, do you live:	◆ Do not count short visits away from the UK  Month Year      ☐    ☐    ☐    ☐    ☐    ☐    ☐
marital or registered civil partnership status?  Never married and never registered in a civil partnership  Married  In a registered civil partnership  Separated, but still legally married  Separated, but still legally in a civil partnership  Divorced  Formerly in a civil partnership which is now legally dissolved  Widowed  Surviving partner from a civil partnership  Are you a schoolchild or student in full-time education?  Yes  No   go to 8  7 During term-time, do you live:	Do not count short visits away from the UK      Month Year

Individual questions — Person 1	
12 Do you look after, or give any help or support to family members, friends,	17 How is your health in general?
neighbours or others because of either: Iong-term physical / mental ill-health / disability; or problems related to old age?	Very good Good Fair Bad Very bad
Do not count anything you do as part of your paid employment	18 Do you have any of the following, which have lasted, or are expected to last, at least 12 months?
□ No	◆ Tick all that apply
Yes, 1 to 19 hours a week	Deafness or partial hearing loss
Yes, 20 to 34 hours a week	Blindness or partial sight loss
Yes, 35 to 49 hours a week Yes, 50 or more hours a week	Full or partial loss of voice or difficulty speaking (a condition that requires you to use equipment to speak)
13 How well can you understand, speak, read and write English?  Tick one box in each column	Learning disability (a condition that you have had since childhood that affects the way you learn, understand information and communicate)
Understand Speak Read Write (spoken)	Learning difficulty (a specific learning condition that affects the way you learn and process information)
Very well	Developmental disorder (a condition that you
Well	have had since childhood which affects motor, cognitive, social and emotional skills, and
Not well	speech and language)
Not at all	Physical disability (a condition that substantially limits one or more basic physical activities such as walking, climbing stairs, lifting or carrying)
14 Can you understand, speak, read and write Scottish Gaelic or Scots?  ◆ Tick all that apply	Mental health condition (a condition that affects your emotional, physical and mental wellbeing)
Understand Speak Read Write (spoken)	Long-term illness, disease or condition (a condition, not listed above, that you may have for life, which may be managed with treatment
Scottish Gaelic	or medication)
Scots	Other condition, please write in:
or	
☐ No skills in either language	
15 Can you use British Sign Language (BSL)?	☐ No condition
Yes No	19 Are your day-to-day activities limited
16 What is your main language?  ◆ Tick one box only	because of a health problem or disability which has lasted, or is expected to last, at least 12 months?  Include problems related to old age
English	Yes, limited a lot
Other, please write in (including BSL and TACTILE BSL):	Yes, limited a little
	No
Page 8	

Individual questions — Person 1	
20 What passports do you hold?  Tick all that apply	23 What is your ethnic group?  ♦ Choose ONE section from A to F, then tick ONE
	box which <b>best describes</b> your ethnic group or
United Kingdom	background  A White
☐ Ireland	Scottish
Other, please write in:	Other British
	☐ Irish
	Polish
None	Gypsy / Traveller
	Roma
21 What religion, religious denomination or body do you belong to?	Showman / Showwoman
♦ This question is <b>voluntary</b>	Other white ethnic group, please write in:
☐ None	
☐ Church of Scotland	B Mixed or multiple ethnic groups
☐ Roman Catholic	Any mixed or multiple ethnic groups, please write in:
Other Christian, please write in below:	
☐ Muslim, write in denomination or school below:	
Hindu	C Asian, Scottish Asian or British Asian
☐ Buddhist	Pakistani, Scottish Pakistani or British Pakistani
Sikh	☐ Indian, Scottish Indian or British Indian
☐ Jewish	☐ Bangladeshi, Scottish Bangladeshi or British Bangladeshi
☐ Pagan	Chinese, Scottish Chinese or British Chinese
Another religion or body, please write in:	Other, please write in:
22 What do you feel is your national identity?	D African, Scottish African or British African
Tick all that apply	Please write in (for example, NIGERIAN, SOMALI):
☐ Scottish	
☐ English	E Caribbean or Black
☐ Northern Irish	☐ Please write in (for example, SCOTTISH CARIBBEAN, BLACK SCOTTISH):
☐ Welsh	
☐ British	F Other ethnic group
Other, please write in:	Arab, Scottish Arab or British Arab
	Other, please write in (for example, SIKH,
HOM 6	JEWISH):
9	
	Page 9

24 If you are aged 16 or over ⇒ go to 25	27 In the last seven days, were you doing any
If you are aged 15 or under   → go to 41	of the following?  ♦ Include casual or temporary work, even if only for one hour
25 Which of these qualifications do you have?  ♦ Tick all that apply	<ul><li>↑ Tick all that apply</li><li>☐ Working as an employee → go to 33</li></ul>
O Grade, Standard Grade, National 3, 4 or 5, Intermediate 1 or 2, GCSE, CSE or equivalent  Higher, Advanced Higher, SCE Higher Grade, CSYS, A Level, AS Level or equivalent	<ul> <li>Self-employed or freelance → go to 33</li> <li>Temporarily away from work ill, on holiday or temporarily laid off → go to 33</li> <li>On maternity or paternity leave → go to 33</li> </ul>
Apprenticeship (trade or equivalent)	☐ Doing any other kind of paid work → go to 33
Apprenticeship (Foundation or equivalent)	None of the above
Apprenticeship (Modern or equivalent)	28 Which of the following describes what you were doing in the last seven days?
Apprenticeship (Graduate or equivalent)	<ul> <li>↑ Tick all that apply</li> <li>☐ Retired (whether receiving a pension or not)</li> </ul>
GSVQ Foundation or Intermediate, SVQ level 1 or 2, SCOTVEC Module, City and Guilds Craft or equivalent	Studying Looking after home or family
GSVQ Advanced, SVQ level 3, ONC, OND, SCOTVEC National Diploma, City and Guilds Advanced Craft or equivalent	Long-term sick or disabled Other
HNC, HND, SVQ level 4 or equivalent	29 In the last four weeks, were you actively looking for any kind of paid work?
Other school qualifications not already mentioned (including foreign qualifications)	Yes No
Other post-school but pre-Higher Education qualifications not already mentioned (including foreign qualifications)	30 If a job became available now, could you start it within two weeks?  Yes  No
Degree, Postgraduate qualifications, Masters,	31 In the last seven days, were you waiting to start a job already accepted?
Degree, Postgraduate qualifications, Masters, PhD, SVQ level 5 or equivalent  Professional qualifications (for example,	31 In the last seven days, were you waiting to start a job already accepted?  Yes No
Degree, Postgraduate qualifications, Masters, PhD, SVQ level 5 or equivalent	start a job already accepted?  Yes No  No  32 Have you ever done any paid work?
Degree, Postgraduate qualifications, Masters, PhD, SVQ level 5 or equivalent  Professional qualifications (for example,	start a job already accepted?  Yes No  32 Have you ever done any paid work?  Yes, in the last 12 months
Degree, Postgraduate qualifications, Masters, PhD, SVQ level 5 or equivalent  Professional qualifications (for example, teaching, nursing, accountancy)  Other Higher Education qualifications not	start a job already accepted?  Yes No  No  32 Have you ever done any paid work?
Degree, Postgraduate qualifications, Masters, PhD, SVQ level 5 or equivalent  Professional qualifications (for example, teaching, nursing, accountancy)  Other Higher Education qualifications not already mentioned (including foreign)	start a job already accepted?  Yes No  32 Have you ever done any paid work?  Yes, in the last 12 months  Yes, but not in the last 12 months  No, have never worked po to 41
Degree, Postgraduate qualifications, Masters, PhD, SVQ level 5 or equivalent  Professional qualifications (for example, teaching, nursing, accountancy)  Other Higher Education qualifications not already mentioned (including foreign qualifications)  No qualifications	start a job already accepted?  Yes No  32 Have you ever done any paid work?  Yes, in the last 12 months  Yes, but not in the last 12 months  No, have never worked → go to 41  33 Answer the remaining questions for your main job or, if not working, your last main
Degree, Postgraduate qualifications, Masters, PhD, SVQ level 5 or equivalent  Professional qualifications (for example, teaching, nursing, accountancy)  Other Higher Education qualifications not already mentioned (including foreign qualifications)	start a job already accepted?  ☐ Yes ☐ No  32 Have you ever done any paid work? ☐ Yes, in the last 12 months ☐ Yes, but not in the last 12 months ☐ No, have never worked → go to 41  33 Answer the remaining questions for your
Degree, Postgraduate qualifications, Masters, PhD, SVQ level 5 or equivalent  Professional qualifications (for example, teaching, nursing, accountancy)  Other Higher Education qualifications not already mentioned (including foreign qualifications)  No qualifications  26 Have you previously served in the UK Armed Forces?	start a job already accepted?  Yes No  32 Have you ever done any paid work?  Yes, in the last 12 months  Yes, but not in the last 12 months  No, have never worked ⇒ go to 41  33 Answer the remaining questions for your main job or, if not working, your last main job.  Your main job is the job in which you usually
<ul> <li>□ Degree, Postgraduate qualifications, Masters, PhD, SVQ level 5 or equivalent</li> <li>□ Professional qualifications (for example, teaching, nursing, accountancy)</li> <li>□ Other Higher Education qualifications not already mentioned (including foreign qualifications)</li> <li>□ No qualifications</li> <li>26 Have you previously served in the UK Armed Forces?</li> <li>◆ Current serving members should only tick 'No'</li> <li>□ No</li> </ul>	start a job already accepted?  Yes No  32 Have you ever done any paid work?  Yes, in the last 12 months  Yes, but not in the last 12 months  No, have never worked ⇒ go to 41  33 Answer the remaining questions for your main job or, if not working, your last main job.  Your main job is the job in which you usually work (worked) the most hours  34 In your main job, what is (was) your
<ul> <li>□ Degree, Postgraduate qualifications, Masters, PhD, SVQ level 5 or equivalent</li> <li>□ Professional qualifications (for example, teaching, nursing, accountancy)</li> <li>□ Other Higher Education qualifications not already mentioned (including foreign qualifications)</li> <li>□ No qualifications</li> <li>26 Have you previously served in the UK Armed Forces?</li> <li>◆ Current serving members should only tick 'No'</li> <li>□ No</li> <li>□ Yes, previously served in Regular Armed Forces</li> </ul>	start a job already accepted?  Yes No  32 Have you ever done any paid work?  Yes, in the last 12 months  Yes, but not in the last 12 months  No, have never worked → go to 41  33 Answer the remaining questions for your main job or, if not working, your last main job.  Your main job is the job in which you usually work (worked) the most hours  34 In your main job, what is (was) your employment status?  Employee  Self-employed or freelance without employees
<ul> <li>□ Degree, Postgraduate qualifications, Masters, PhD, SVQ level 5 or equivalent</li> <li>□ Professional qualifications (for example, teaching, nursing, accountancy)</li> <li>□ Other Higher Education qualifications not already mentioned (including foreign qualifications)</li> <li>□ No qualifications</li> <li>26 Have you previously served in the UK Armed Forces?</li> <li>◆ Current serving members should only tick 'No'</li> <li>□ No</li> </ul>	start a job already accepted?  Yes No  32 Have you ever done any paid work?  Yes, in the last 12 months  Yes, but not in the last 12 months  No, have never worked → go to 41  33 Answer the remaining questions for your main job or, if not working, your last main job.  Your main job is the job in which you usually work (worked) the most hours  34 In your main job, what is (was) your employment status?  Employee

	Individual questions — Person 1	l l
	<ul> <li>35 What is (was) the name of the organisation or business you work (worked) for?</li> <li>If you are (were) self-employed in your own business, please write in your business name:</li> </ul>	41 If you currently work or study (or both)  → go to 42  If you do not currently work or study, including if you are retired → go to 44
	or ☐ No organisation or work (worked) for a private individual  36 What is (was) your full job title?	42 What address do you travel to for your main job or course of study (including school)?  ♦ Answer for the place where you spend the most time  If you report to a depot, please write in the depot address  Work mainly at, or from, home   go to 44  Distance learning, home schooled or equivalent
	◆ For example, RETAIL ASSISTANT, OFFICE CLEANER, DISTRICT NURSE, PRIMARY SCHOOL TEACHER ◆ Do not state your grade or pay band	
	37 Briefly describe what you do (did) in your main job.	Postcode  The address entered above is my place of  Work  Study
(	38 What is (was) the main activity of your	
	organisation, business or freelance work?  ◆ For example, ARMED FORCES, WOMEN'S CLOTHING RETAILER, HOSPITAL, PRIMARY EDUCATION, FISH WHOLESALER  ◆ If you are (were) a civil servant, please write GOVERNMENT and give the name of your department. For example, MARINE	43 How do you usually travel to your main job or course of study (including school)?  Answer for your usual travel to the place where you spend the most time  Tick the box for the longest part of your journey by distance  Tick one box only
	organisation, business or freelance work?  ◆ For example, ARMED FORCES, WOMEN'S CLOTHING RETAILER, HOSPITAL, PRIMARY EDUCATION, FISH WHOLESALER  ◆ If you are (were) a civil servant, please write GOVERNMENT and give the name	or course of study (including school)?  ◆ Answer for your usual travel to the place where you spend the most time  ◆ Tick the box for the longest part of your journey by distance
	organisation, business or freelance work? For example, ARMED FORCES, WOMEN'S CLOTHING RETAILER, HOSPITAL, PRIMARY EDUCATION, FISH WHOLESALER If you are (were) a civil servant, please write GOVERNMENT and give the name of your department. For example, MARINE SCOTLAND If you are (were) a local government officer, please write LOCAL GOVERNMENT and give the name of your department. For example, SOCIAL SERVICES, TRANSPORT DEPARTMENT  39 Do (did) you supervise or oversee the work	or course of study (including school)?  Answer for your usual travel to the place where you spend the most time Tick the box for the longest part of your journey by distance Tick one box only Driving a car or van Passenger in a car or van Taxi or private hire Motorcycle, scooter or moped
	organisation, business or freelance work?  For example, ARMED FORCES, WOMEN'S CLOTHING RETAILER, HOSPITAL, PRIMARY EDUCATION, FISH WHOLESALER  If you are (were) a civil servant, please write GOVERNMENT and give the name of your department. For example, MARINE SCOTLAND  If you are (were) a local government officer, please write LOCAL GOVERNMENT and give the name of your department. For example, SOCIAL SERVICES, TRANSPORT DEPARTMENT  Objective to the property of the property of the plane of your department. For example, SOCIAL SERVICES, TRANSPORT DEPARTMENT  Objective to the property of the property of the plane of your department. For example, SOCIAL SERVICES, TRANSPORT DEPARTMENT  Objective to the property of the property of the plane	or course of study (including school)?  Answer for your usual travel to the place where you spend the most time Tick the box for the longest part of your journey by distance  Tick one box only  Driving a car or van  Passenger in a car or van  Taxi or private hire  Motorcycle, scooter or moped  On foot  Bicycle  Bus, minibus or coach  Train  Underground, subway or tram  Other   44 There are no more questions for Person 1.  If there are no more people in your household
H0v1.0	organisation, business or freelance work?  ♦ For example, ARMED FORCES, WOMEN'S CLOTHING RETAILER, HOSPITAL, PRIMARY EDUCATION, FISH WHOLESALER  • If you are (were) a civil servant, please write GOVERNMENT and give the name of your department. For example, MARINE SCOTLAND  • If you are (were) a local government officer, please write LOCAL GOVERNMENT and give the name of your department. For example, SOCIAL SERVICES, TRANSPORT DEPARTMENT  39 Do (did) you supervise or oversee the work of other employees on a day-to-day basis?  Yes □ No	or course of study (including school)?  Answer for your usual travel to the place where you spend the most time Tick the box for the longest part of your journey by distance Tick one box only  Driving a car or van  Passenger in a car or van  Taxi or private hire  Motorcycle, scooter or moped  On foot  Bicycle  Bus, minibus or coach  Train  Underground, subway or tram  Other  Other

Individual questions — Person 2	$\neg$
1 What is your name? (Person 2 in H3 on page 3) First name(s) Last name	8 Which of the following best describes your sexual orientation?  ♦ This question is voluntary  ♦ Answer only if you are aged 16 or over  Tick one box only
	Straight / Heterosexual Gay or Lesbian
2 What is your date of birth?	
Day Month Year	Bisexual  Other sexual orientation, please write in:
3 What is your sex?	
Female Male	9 What is your country of birth?
4 Do you consider yourself to be trans, or have a trans history?  ◆ This question is voluntary  ◆ Answer only if you are aged 16 or over  ◆ Trans is a term used to describe people whose gender is not the same as the sex they were registered at birth  ◆ Tick one box only	Scotland → go to 11 England → go to 11 Northern Ireland → go to 11 Wales → go to 11 Republic of Ireland
No Yes, please describe your trans status (for example, non-binary, trans man, trans woman):	Elsewhere, please write in the current name of the country:
On 21 March 2021, what is your legal marital or registered civil partnership status?  Never married and never registered in a civil partnership	10 If you were not born in the United Kingdom, when dld you most recently arrive to live here?  ◆ Do not count short visits away from the UK  Month Year
Married In a registered civil partnership Separated, but still legally married Separated, but still legally in a civil partnership Divorced Formerly in a civil partnership which is now legally dissolved Widowed	11 One year ago, what was your usual address?  ♦ If you had no usual address one year ago, state the address where you were staying  □ Same as Person 1  □ The address on the front of the questionnaire  □ Student term-time / boarding school address in the UK, please write in below:  □ Another address in the UK, please write in:
Surviving partner from a civil partnership	
6 Are you a schoolchild or student in full-time education?  ☐ Yes ☐ No → go to 8	Postcode
7 During term-time, do you live:  ☐ at the address on the front of this questionnaire? ☐ at another address? → go to 44	Outside the UK, please write in country:
Page 12	

Individual questions — Person 2	
12 Do you look after, or give any help or support to family members, friends,	17 How is your health in general?
neighbours or others because of either:	Very good Good Fair Bad Very bad
Iong-term physical / mental ill-health / disability; or	
<ul> <li>problems related to old age?</li> <li>Do not count anything you do as part of your</li> </ul>	18 Do you have any of the following, which
paid employment	have lasted, or are expected to last, at least
□ No	Tick all that apply
Yes, 1 to 19 hours a week	Deafness or partial hearing loss
Yes, 20 to 34 hours a week	☐ Blindness or partial sight loss
Yes, 35 to 49 hours a week	Full or partial loss of voice or difficulty speaking
Yes, 50 or more hours a week	(a condition that requires you to use equipment to speak)
<ul> <li>13 How well can you understand, speak, read and write English?</li> <li>◆ Tick one box in each column</li> </ul>	Learning disability (a condition that you have had since childhood that affects the way you learn, understand information and communicate)
Understand Speak Read Write (spoken)	Learning difficulty (a specific learning condition that affects the way you learn and process information)
Very well	Developmental disorder (a condition that you
Well	have had since childhood which affects motor, cognitive, social and emotional skills, and
Not well	speech and language)
Not at all	Physical disability (a condition that substantially limits one or more basic physical activities such as walking, climbing stairs, lifting or carrying)
14 Can you understand, speak, read and write Scottish Gaelic or Scots?  ◆ Tick all that apply	Mental health condition (a condition that affects your emotional, physical and mental wellbeing)
Understand Speak Read Write (spoken)	Long-term illness, disease or condition (a
	condition, not listed above, that you may have for life, which may be managed with treatment
Scottish Gaelic	or medication)
Scots	Other condition, please write in:
or	
☐ No skills in either language	
15 Can you use British Sign Language (BSL)?	☐ No condition
Yes No	
16 What is your main language?	19 Are your day-to-day activities limited because of a health problem or disability
Tick one box only	which has lasted, or is expected to last, at least 12 months?
☐ English	♦ Include problems related to old age
Other, please write in (including BSL and	Yes, limited a lot
TACTILE BSL):	Yes, limited a little
H041.0	□ No
	Page 13

Individual questions — Person 2	
20 What passports do you hold?  ◆ Tick all that apply	23 What is your ethnic group?  ◆ Choose ONE section from A to F, then tick ONE box which best describes your ethnic group or
☐ United Kingdom	background
☐ Ireland	A White Scottish
Other, please write in:	Other British
	☐ Utiel British
	Polish
Ness	Gypsy / Traveller
None	Roma
21 What religion, religious denomination or	Showman / Showwoman
body do you belong to?  ♦ This question is voluntary	Other white ethnic group, please write in:
□ None	
Church of Scotland	B Mixed or multiple ethnic groups
Roman Catholic	Any mixed or multiple ethnic groups, please
	write in:
Other Christian, please write in below:	
Muslim, write in denomination or school below:	
Hindu	C Asian, Scottish Asian or British Asian
Buddhist	Pakistani, Scottish Pakistani or British Pakistani
Sikh	☐ Indian, Scottish Indian or British Indian
☐ Jewish	☐ Bangladeshi, Scottish Bangladeshi or British Bangladeshi
☐ Pagan	☐ Chinese, Scottish Chinese or British Chinese
Another religion or body, please write in:	Other, please write in:
	D African, Scottish African or British African
22 What do you feel is your national identity?  ♦ Tick all that apply	Please write in (for example, NIGERIAN, SOMALI):
Scottish	
☐ English	E Caribbean or Black
☐ Northern Irish	Please write in (for example, SCOTTISH)
Welsh	CARIBBEAN, BLACK SCOTTISH):
□ British	
Other, please write in:	F Other ethnic group Arab, Scottish Arab or British Arab
	Other, please write in (for example, SIKH,
	JEWISH)
	0. Med.
Page 14	

	Individual questions — Person 2	
	24 If you are aged 16 or over ⇒ go to 25	27 In the last seven days, were you doing any
	If you are aged 15 or under ⇒ go to 41	of the following?  ♦ Include casual or temporary work, even if only for one hour
	25 Which of these qualifications do you have?  Tick all that apply	Tick all that apply
	_	Working as an employee   → go to 33
	O Grade, Standard Grade, National 3, 4 or 5, Intermediate 1 or 2, GCSE, CSE or equivalent	Self-employed or freelance → go to 33  ☐ Temporarily away from work ill, on holiday or
	Higher, Advanced Higher, SCE Higher Grade, CSYS, A Level, AS Level or equivalent	temporarily laid off → go to 33  On maternity or paternity leave → go to 33
	Apprenticeship (trade or equivalent)	☐ Doing any other kind of paid work ⇒ go to 33
	Apprenticeship (Foundation or equivalent)	☐ None of the above
	Apprenticeship (Modern or equivalent)	28 Which of the following describes what you were doing in the last seven days?
	Apprenticeship (Graduate or equivalent)	↑ Tick all that apply     Retired (whether receiving a pension or not)
	GSVQ Foundation or Intermediate, SVQ level 1	Studying
	or 2, SCOTVEC Module, City and Guilds Craft or equivalent	Looking after home or family
	GSVQ Advanced, SVQ level 3, ONC, OND,	Long-term sick or disabled
	SCOTVEC National Diploma, City and Guilds Advanced Craft or equivalent	Other
	☐ HNC, HND, SVQ level 4 or equivalent	29 In the last four weeks, were you actively looking for any kind of paid work?
	Other school qualifications not already	Yes No
	mentioned (including foreign qualifications)	
	Other post-school but pre-Higher Education qualifications not already mentioned (including	30 If a job became available now, could you start it within two weeks?
	Other post-school but pre-Higher Education	start it within two weeks?  Yes No
	Other post-school but pre-Higher Education qualifications not already mentioned (including	start it within two weeks?
	Other post-school but pre-Higher Education qualifications not already mentioned (including foreign qualifications)  Degree, Postgraduate qualifications, Masters, PhD, SVQ level 5 or equivalent  Professional qualifications (for example,	start it within two weeks?  Yes No  No  In the last seven days, were you waiting to
	Other post-school but pre-Higher Education qualifications not already mentioned (including foreign qualifications)  Degree, Postgraduate qualifications, Masters, PhD, SVQ level 5 or equivalent	start it within two weeks?  Yes No  1 In the last seven days, were you waiting to start a job already accepted?  Yes No  2 Have you ever done any paid work?
	Other post-school but pre-Higher Education qualifications not already mentioned (including foreign qualifications)  Degree, Postgraduate qualifications, Masters, PhD, SVQ level 5 or equivalent  Professional qualifications (for example, teaching, nursing, accountancy)  Other Higher Education qualifications not	start it within two weeks?  Yes No  In the last seven days, were you waiting to start a job already accepted?  No
	Other post-school but pre-Higher Education qualifications not already mentioned (including foreign qualifications)  Degree, Postgraduate qualifications, Masters, PhD, SVQ level 5 or equivalent  Professional qualifications (for example, teaching, nursing, accountancy)	start it within two weeks?  Yes No  1 In the last seven days, were you waiting to start a job already accepted?  Yes No  2 Have you ever done any paid work?  Yes, in the last 12 months  Yes, but not in the last 12 months
	Other post-school but pre-Higher Education qualifications not already mentioned (including foreign qualifications)  Degree, Postgraduate qualifications, Masters, PhD, SVQ level 5 or equivalent  Professional qualifications (for example, teaching, nursing, accountancy)  Other Higher Education qualifications not already mentioned (including foreign	start it within two weeks?  Yes No  1 In the last seven days, were you waiting to start a job already accepted?  No  2 Have you ever done any paid work?  Yes, in the last 12 months  Yes, but not in the last 12 months  No, have never worked po to 41
	Other post-school but pre-Higher Education qualifications not already mentioned (including foreign qualifications)  Degree, Postgraduate qualifications, Masters, PhD, SVQ level 5 or equivalent  Professional qualifications (for example, teaching, nursing, accountancy)  Other Higher Education qualifications not already mentioned (including foreign qualifications)  No qualifications	start it within two weeks?  Yes No  1 In the last seven days, were you waiting to start a job already accepted?  No  1 Have you ever done any paid work?  Yes, in the last 12 months  Yes, but not in the last 12 months  No, have never worked po to 41  1 Answer the remaining questions for your
	Other post-school but pre-Higher Education qualifications not already mentioned (including foreign qualifications)  Degree, Postgraduate qualifications, Masters, PhD, SVQ level 5 or equivalent  Professional qualifications (for example, teaching, nursing, accountancy)  Other Higher Education qualifications not already mentioned (including foreign qualifications)	start it within two weeks?  ☐ Yes ☐ No  31 In the last seven days, were you waiting to start a job already accepted? ☐ Yes ☐ No  32 Have you ever done any paid work? ☐ Yes, in the last 12 months ☐ Yes, but not in the last 12 months ☐ No, have never worked ➡ go to 41  33 Answer the remaining questions for your main job or, if not working, your last main job.
	Other post-school but pre-Higher Education qualifications not already mentioned (including foreign qualifications)  Degree, Postgraduate qualifications, Masters, PhD, SVQ level 5 or equivalent  Professional qualifications (for example, teaching, nursing, accountancy)  Other Higher Education qualifications not already mentioned (including foreign qualifications)  No qualifications	start it within two weeks?  Yes No  In the last seven days, were you waiting to start a job already accepted?  Yes No  A Have you ever done any paid work?  Yes, in the last 12 months  Yes, but not in the last 12 months  No, have never worked → go to 41  Answer the remaining questions for your main job or, if not working, your last main job.  Your main job is the job in which you usually work (worked) the most hours
	<ul> <li>Other post-school but pre-Higher Education qualifications not already mentioned (including foreign qualifications)</li> <li>□ Degree, Postgraduate qualifications, Masters, PhD, SVQ level 5 or equivalent</li> <li>□ Professional qualifications (for example, teaching, nursing, accountancy)</li> <li>□ Other Higher Education qualifications not already mentioned (including foreign qualifications)</li> <li>□ No qualifications</li> <li>26 Have you previously served in the UK Armed Forces?</li> <li>◆ Current serving members should only tick 'No'</li> </ul>	start it within two weeks?  ☐ Yes ☐ No  31 In the last seven days, were you waiting to start a job already accepted?  ☐ Yes ☐ No  32 Have you ever done any paid work?  ☐ Yes, in the last 12 months  ☐ Yes, but not in the last 12 months  ☐ No, have never worked ➡ go to 41  33 Answer the remaining questions for your main job or, if not working, your last main job.  ♣ Your main job is the job in which you usually
	<ul> <li>Other post-school but pre-Higher Education qualifications not already mentioned (including foreign qualifications)</li> <li>Degree, Postgraduate qualifications, Masters, PhD, SVQ level 5 or equivalent</li> <li>Professional qualifications (for example, teaching, nursing, accountancy)</li> <li>Other Higher Education qualifications not already mentioned (including foreign qualifications)</li> <li>No qualifications</li> <li>4 Have you previously served in the UK Armed Forces?</li> <li>Current serving members should only tick 'No'</li> <li>No</li> </ul>	start it within two weeks?  Yes No  In the last seven days, were you waiting to start a job already accepted?  Yes No  A Have you ever done any paid work?  Yes, in the last 12 months  Yes, but not in the last 12 months  No, have never worked → go to 41  Answer the remaining questions for your main job or, if not working, your last main job.  Your main job is the job in which you usually work (worked) the most hours  I n your main job, what is (was) your
0.	Other post-school but pre-Higher Education qualifications not already mentioned (including foreign qualifications)  □ Degree, Postgraduate qualifications, Masters, PhD, SVQ level 5 or equivalent  □ Professional qualifications (for example, teaching, nursing, accountancy)  □ Other Higher Education qualifications not already mentioned (including foreign qualifications)  □ No qualifications  26 Have you previously served in the UK Armed Forces?  ◆ Current serving members should only tick 'No'  □ No  □ Yes, previously served in Regular Armed Forces	start it within two weeks?  Yes No  In the last seven days, were you waiting to start a job already accepted?  Yes No  32 Have you ever done any paid work?  Yes, in the last 12 months  Yes, but not in the last 12 months  No, have never worked po to 41  33 Answer the remaining questions for your main job or, if not working, your last main job.  Your main job is the job in which you usually work (worked) the most hours  34 In your main job, what is (was) your employment status?
H0v1.0	<ul> <li>Other post-school but pre-Higher Education qualifications not already mentioned (including foreign qualifications)</li> <li>Degree, Postgraduate qualifications, Masters, PhD, SVQ level 5 or equivalent</li> <li>Professional qualifications (for example, teaching, nursing, accountancy)</li> <li>Other Higher Education qualifications not already mentioned (including foreign qualifications)</li> <li>No qualifications</li> <li>4 Have you previously served in the UK Armed Forces?</li> <li>Current serving members should only tick 'No'</li> <li>No</li> </ul>	start it within two weeks?  Yes No  In the last seven days, were you waiting to start a job already accepted?  Yes No  Have you ever done any paid work?  Yes, in the last 12 months  Yes, but not in the last 12 months  No, have never worked of go to 41  Answer the remaining questions for your main job or, if not working, your last main job.  Your main job is the job in which you usually work (worked) the most hours  In your main job, what is (was) your employment status?  Employee

35 What is (was) the name of the organisation or business you work (worked) for?  ◆ If you are (were) self-employed in your own business, please write in your business name:	41 If you currently work or study (or both)  → go to 42  If you do not currently work or study, including if you are retired → go to 44
or ☐ No organisation or work (worked) for a private individual  36 What is (was) your full job title?  ◆ For example, RETAIL ASSISTANT, OFFICE CLEANER, DISTRICT NURSE, PRIMARY SCHOOL TEACHER  ◆ Do not state your grade or pay band	42 What address do you travel to for your main job or course of study (including school)?  ♦ Answer for the place where you spend the most time  • If you report to a depot, please write in the depot address  Work mainly at, or from, home → go to 44  Distance learning, home schooled or equivalent → go to 44  No fixed place → go to 43  Work on an offshore installation → go to 43
	The address below, please write in:
37 Briefly describe what you do (did) in your main job.	Postcode
	The address entered above is my place of Work Study
38 What is (was) the main activity of your organisation, business or freelance work?  ◆ For example, ARMED FORCES, WOMEN'S CLOTHING RETAILER, HOSPITAL, PRIMARY EDUCATION, FISH WHOLESALER  ◆ If you are (were) a civil servant, please write GOVERNMENT and give the name of your department. For example, MARINE SCOTLAND  ◆ If you are (were) a local government officer, please write LOCAL GOVERNMENT and	43 How do you usually travel to your main job or course of study (including school)?  ♦ Answer for your usual travel to the place where you spend the most time  ♦ Tick the box for the longest part of your journey by distance  ↑ Tick one box only  □ Driving a car or van  □ Passenger in a car or van
give the name of your department. For example, SOCIAL SERVICES, TRANSPORT DEPARTMENT  39 Do (did) you supervise or oversee the work of other employees on a day-to-day basis?	Taxi or private hire  Motorcycle, scooter or moped  On foot Bicycle Bus, minibus or coach Train Underground, subway or tram Other
example, SOCIAL SERVICES, TRANSPORT DEPARTMENT  39 Do (did) you supervise or oversee the work	Motorcycle, scooter or moped On foot Bicycle Bus, minibus or coach Train Underground, subway or tram

Individual questions — Person 3	
1 What is your name? (Person 3 in H3 on page 3) First name(s) Last name  2 What is your date of birth? Day Month Year	8 Which of the following best describes your sexual orientation?  ◆ This question is voluntary  ◆ Answer only if you are aged 16 or over  ◆ Tick one box only  □ Straight / Heterosexual  □ Gay or Lesbian  □ Bisexual  □ Other sexual orientation, please write in:
3 What is your sex?	
☐ Female ☐ Male	9 What is your country of birth?
4 Do you consider yourself to be trans, or have a trans history?  ◆ This question is voluntary  ◆ Answer only if you are aged 16 or over  ◆ Trans is a term used to describe people whose gender is not the same as the sex they were registered at birth  ◆ Tick one box only	Scotland → go to 11 England → go to 11 Northern Ireland → go to 11 Wales → go to 11 Republic of Ireland
	Elsewhere, please write in the current name of
<ul><li>No</li><li>Yes, please describe your trans status (for example, non-binary, trans man, trans woman):</li></ul>	the country:
5 On 21 March 2021, what is your legal	10 If you were not born in the United Kingdom, when dld you most recently arrive to live here?  ◆ Do not count short visits away from the UK
marital or registered civil partnership status?  Never married and never registered in a civil nartnership	Month Year
status?  Never married and never registered in a civil partnership  Married  In a registered civil partnership  Separated, but still legally married  Separated, but still legally in a civil partnership  Divorced  Formerly in a civil partnership which is now	Month Year  11 One year ago, what was your usual address?  ◆ If you had no usual address one year ago, state the address where you were staying  Same as Person 1  The address on the front of the questionnaire  Student term-time / boarding school address in
status?  Never married and never registered in a civil partnership  Married  In a registered civil partnership  Separated, but still legally married  Separated, but still legally in a civil partnership  Divorced  Formerly in a civil partnership which is now legally dissolved	Month Year  11 One year ago, what was your usual address?  ◆ If you had no usual address one year ago, state the address where you were staying  Same as Person 1  The address on the front of the questionnaire  Student term-time / boarding school address in the UK, please write in below:
status?  Never married and never registered in a civil partnership  Married  In a registered civil partnership  Separated, but still legally married  Separated, but still legally in a civil partnership  Divorced  Formerly in a civil partnership which is now legally dissolved  Widowed	Month Year  11 One year ago, what was your usual address?  ◆ If you had no usual address one year ago, state the address where you were staying  Same as Person 1  The address on the front of the questionnaire  Student term-time / boarding school address in
status?  Never married and never registered in a civil partnership  Married  In a registered civil partnership  Separated, but still legally married  Separated, but still legally in a civil partnership  Divorced  Formerly in a civil partnership which is now legally dissolved  Widowed  Surviving partner from a civil partnership	Month Year  11 One year ago, what was your usual address?  ◆ If you had no usual address one year ago, state the address where you were staying  Same as Person 1  The address on the front of the questionnaire  Student term-time / boarding school address in the UK, please write in below:
status?  Never married and never registered in a civil partnership  Married  In a registered civil partnership  Separated, but still legally married  Separated, but still legally in a civil partnership  Divorced  Formerly in a civil partnership which is now legally dissolved  Widowed	Month Year  11 One year ago, what was your usual address?  ◆ If you had no usual address one year ago, state the address where you were staying  Same as Person 1  The address on the front of the questionnaire  Student term-time / boarding school address in the UK, please write in below:

Individual questions — Person 3	
12 Do you look after, or give any help or support to family members, friends,	17 How is your health in general?
neighbours or others because of either: • long-term physical / mental ill-health / disability; or • problems related to old age?	Very good Good Fair Bad Very bad
Do not count anything you do as part of your paid employment	18 Do you have any of the following, which have lasted, or are expected to last, at least 12 months?  ◆ Tick all that apply
No Yes, 1 to 19 hours a week	Deafness or partial hearing loss
Yes, 20 to 34 hours a week	☐ Blindness or partial sight loss
Yes, 35 to 49 hours a week Yes, 50 or more hours a week	Full or partial loss of voice or difficulty speaking (a condition that requires you to use equipment to speak)
13 How well can you understand, speak, read and write English?  Tick one box in each column	Learning disability (a condition that you have had since childhood that affects the way you learn, understand information and communicate)
Understand Speak Read Write (spoken)	Learning difficulty (a specific learning condition that affects the way you learn and process information)
Very well	Developmental disorder (a condition that you have had since childhood which affects motor, cognitive, social and emotional skills, and speech and language)
Not at all	Physical disability (a condition that substantially limits one or more basic physical activities such as walking, climbing stairs, lifting or carrying)
Scottish Gaelic or Scots?  ◆ Tick all that apply	Mental health condition (a condition that affects your emotional, physical and mental wellbeing)
Understand Speak Read Write (spoken)  Scottish Gaelic	Long-term illness, disease or condition (a condition, not listed above, that you may have for life, which may be managed with treatment or medication)
Scots	Other condition, please write in:
or	
No skills in either language	
15 Can you use British Sign Language (BSL)?	☐ No condition
Yes No  16 What is your main language?	19 Are your day-to-day activities limited because of a health problem or disability which has lasted, or is expected to last, at
♦ Tick one box only	least 12 months?  ♦ Include problems related to old age
☐ English ☐ Other, please write in (including BSL and	Yes, limited a lot
TACTILE BSL):	Yes, limited a little
	□ No

Individual questions — Person 3	
20 What passports do you hold?  Tick all that apply	23 What is your ethnic group?  ♦ Choose ONE section from A to F, then tick ONE
_	box which <b>best describes</b> your ethnic group or
United Kingdom	background  A White
☐ Ireland ☐	Scottish
Other, please write in:	Other British
	☐ Irish
	Polish
None	Gypsy / Traveller
	Roma
21 What religion, religious denomination or body do you belong to?	Showman / Showwoman
This question is voluntary	Other white ethnic group, please write in:
None	
Church of Scotland	B Mixed or multiple ethnic groups
☐ Roman Catholic	Any mixed or multiple ethnic groups, please write in:
Other Christian, please write in below:	
☐ Muslim, write in denomination or school below:	
Hindu	C Asian, Scottish Asian or British Asian
☐ Buddhist	Pakistani, Scottish Pakistani or British Pakistani
Sikh	☐ Indian, Scottish Indian or British Indian
☐ Jewish	☐ Bangladeshi, Scottish Bangladeshi or British Bangladeshi
☐ Pagan	Chinese, Scottish Chinese or British Chinese
Another religion or body, please write in:	Other, please write in:
	D African, Scottish African or British African
22 What do you feel is your national identity?  Tick all that apply	Please write in (for example, NIGERIAN, SOMALI):
☐ Scottish	
☐ English	E Caribbean or Black
☐ Northern Irish	Please write in (for example, SCOTTISH CARIBBEAN, BLACK SCOTTISH):
☐ Welsh	SANIBEAN, BEAUTOUTHOU).
☐ British	5 Other attends arrange
Other, please write in:	F Other ethnic group  ☐ Arab, Scottish Arab or British Arab
	Other, please write in (for example, SIKH,
0,1	JEWISH):
HOM O	
L	Page 19

Individual questions — Person 3	I
24 If you are aged 16 or over ⇒ go to 25	27 In the last seven days, were you doing any
If you are aged 15 or under   → go to 41	of the following?  ♦ Include casual or temporary work, even if only for one hour
25 Which of these qualifications do you have?  ♦ Tick all that apply	<ul><li>Tick all that apply</li><li>Working as an employee ⇒ go to 33</li></ul>
O Grade, Standard Grade, National 3, 4 or 5, Intermediate 1 or 2, GCSE, CSE or equivalent  Higher, Advanced Higher, SCE Higher Grade, CSYS, A Level, AS Level or equivalent	<ul> <li>Self-employed or freelance → go to 33</li> <li>Temporarily away from work ill, on holiday or temporarily laid off → go to 33</li> <li>On maternity or paternity leave → go to 33</li> </ul>
Apprenticeship (trade or equivalent)	☐ Doing any other kind of paid work → go to 33
Apprenticeship (Foundation or equivalent)	None of the above
Apprenticeship (Modern or equivalent)	28 Which of the following describes what you were doing in the last seven days?
Apprenticeship (Graduate or equivalent)	◆ Tick all that apply     □ Retired (whether receiving a pension or not)
GSVQ Foundation or Intermediate, SVQ level 1 or 2, SCOTVEC Module, City and Guilds Craft or equivalent	Studying Looking after home or family
GSVQ Advanced, SVQ level 3, ONC, OND, SCOTVEC National Diploma, City and Guilds Advanced Craft or equivalent	Long-term sick or disabled Other
☐ HNC, HND, SVQ level 4 or equivalent	29 In the last four weeks, were you actively looking for any kind of paid work?
Other school qualifications not already mentioned (including foreign qualifications)	Yes No
Other post-school but pre-Higher Education qualifications not already mentioned (including foreign qualifications)	30 If a job became available now, could you start it within two weeks?  Yes No
Degree, Postgraduate qualifications, Masters, PhD, SVQ level 5 or equivalent	31 In the last seven days, were you waiting to start a job already accepted?
Professional qualifications (for example,	Yes No
teaching, nursing, accountancy)	32 Have you ever done any paid work?
Other Higher Education qualifications not already mentioned (including foreign	Yes, in the last 12 months Yes, but not in the last 12 months
qualifications)	
□ Na ausegessesses	No, have never worked   go to 41
☐ No qualifications	33 Answer the remaining questions for your
	33 Answer the remaining questions for your main job or, if not working, your last main
□ No qualifications  26 Have you previously served in the UK Armed Forces?  Current serving members should only tick 'No'	33 Answer the remaining questions for your
26 Have you previously served in the UK Armed Forces?  Current serving members should only tick 'No'	33 Answer the remaining questions for your main job or, if not working, your last main job.  • Your main job is the job in which you usually
26 Have you previously served in the UK Armed Forces?  ◆ Current serving members should only tick 'No'  □ No	33 Answer the remaining questions for your main job or, if not working, your last main job.  Your main job is the job in which you usually work (worked) the most hours  34 In your main job, what is (was) your
26 Have you previously served in the UK Armed Forces?  ◆ Current serving members should only tick 'No'  No  Yes, previously served in Regular Armed Forces	33 Answer the remaining questions for your main job or, if not working, your last main job.  ◆ Your main job is the job in which you usually work (worked) the most hours  34 In your main job, what is (was) your employment status?  □ Employee □ Self-employed or freelance without employees
26 Have you previously served in the UK Armed Forces?  ◆ Current serving members should only tick 'No'  □ No	33 Answer the remaining questions for your main job or, if not working, your last main job.  ◆ Your main job is the job in which you usually work (worked) the most hours  34 In your main job, what is (was) your employment status?  □ Employee

Individual questions — Person 3	$\neg$
35 What is (was) the name of the organisation or business you work (worked) for?  ◆ If you are (were) self-employed in your own business, please write in your business name:	41 If you currently work or study (or both)  → go to 42  If you do not currently work or study, including if you are retired → go to 44
or ☐ No organisation or work (worked) for a private individual  36 What is (was) your full job title?  ◆ For example, RETAIL ASSISTANT, OFFICE CLEANER, DISTRICT NURSE, PRIMARY SCHOOL TEACHER  ◆ Do not state your grade or pay band	42 What address do you travel to for your main job or course of study (including school)?  ♦ Answer for the place where you spend the most time  ♦ If you report to a depot, please write in the depot address  Work mainly at, or from, home ⇒ go to 44  Distance learning, home schooled or equivalent ⇒ go to 44  No fixed place ⇒ go to 43  Work on an offshore installation ⇒ go to 43  The address below, please write in:
37 Briefly describe what you do (did) in your	
main job.	Postcode The address entered above is my place of Work Study
38 What is (was) the main activity of your organisation, business or freelance work?  ◆ For example, ARMED FORCES, WOMEN'S CLOTHING RETAILER, HOSPITAL, PRIMARY EDUCATION, FISH WHOLESALER  ◆ If you are (were) a civil servant, please write GOVERNMENT and give the name of your department. For example, MARINE SCOTLAND  ◆ If you are (were) a local government officer, please write LOCAL GOVERNMENT and give the name of your department. For example, SOCIAL SERVICES, TRANSPORT DEPARTMENT	43 How do you usually travel to your main job or course of study (including school)?  ♦ Answer for your usual travel to the place where you spend the most time  ♦ Tick the box for the longest part of your journey by distance  ↑ Tick one box only  □ Driving a car or van  □ Passenger in a car or van  □ Taxi or private hire  □ Motorcycle, scooter or moped
39 Do (did) you supervise or oversee the work of other employees on a day-to-day basis?	On foot Bicycle Bus, minibus or coach Train Underground, subway or tram Other
40 In your main job, how many hours a week do (did) you usually work?  ♦ Include paid and unpaid overtime  0 to 15 16 to 30 31 to 48 49 or more	44 There are no more questions for Person 3.     ♦ If there are no more people in your household please leave the following pages blank.     Otherwise go to questions for Person 4     ♦ If you included anyone in question H5, record their details on the back page     ♦ Remember to sign the declaration on page 1

Individual questions — Person 4	コー
1 What is your name? (Person 4 in H3 on page 3) First name(s) Last name	8 Which of the following best describes your sexual orientation?  ◆ This question is voluntary  ◆ Answer only if you are aged 16 or over  ◆ Tick one box only  □ Straight / Heterosexual  □ Gay or Lesbian
2 What is your date of birth?  Day Month Year	Bisexual Other sexual orientation, please write in:
3 What is your sex?	
☐ Female ☐ Male	9 What is your country of birth?
4 Do you consider yourself to be trans, or have a trans history?  ◆ This question is voluntary  ◆ Answer only if you are aged 16 or over  ◆ Trans is a term used to describe people whose gender is not the same as the sex they were registered at birth  ◆ Tick one box only	Scotland → go to 11  England → go to 11  Northern Ireland → go to 11  Wales → go to 11  Republic of Ireland
□ No	Elsewhere, please write in the current name of the country:
Yes, please describe your trans status (for example, non-binary, trans man, trans woman):	
5 On 21 March 2021, what is your legal marital or registered civil partnership status?  Never married and never registered in a civil partnership  Married  In a registered civil partnership  Separated, but still legally married  Separated, but still legally in a civil partnership  Divorced	10 If you were not born in the United Kingdom, when dld you most recently arrive to live here?  ♦ Do not count short visits away from the UK  Month Year  11 One year ago, what was your usual address?  ♦ If you had no usual address one year ago, state the address where you were staying  □ Same as Person 1  □ The address on the front of the questionnaire  □ Student term-time / boarding school address in
Formerly in a civil partnership which is now legally dissolved	the UK, please write in below:  Another address in the UK, please write in:
☐ Widowed ☐ Surviving partner from a civil partnership	Another address in the ork, piedse white in.
6 Are you a schoolchild or student in full-time education?	
☐ No <b>→</b> go to <b>8</b>	Postcode
7 During term-time, do you live:  ☐ at the address on the front of this questionnaire? ☐ at another address? → go to 44	Outside the UK, please write in country:
Page 22	

Individual questions — Person 4	
12 Do you look after, or give any help or support to family members, friends,	17 How is your health in general?
neighbours or others because of either:	Very good Good Fair Bad Very bad
long-term physical / mental ill-health / disability; or	
<ul> <li>problems related to old age?</li> <li>Do not count anything you do as part of your</li> </ul>	18 Do you have any of the following, which
paid employment	have lasted, or are expected to last, at least 12 months?
□ No	◆ Tick <b>all</b> that apply
Yes, 1 to 19 hours a week	Deafness or partial hearing loss
Yes, 20 to 34 hours a week	Blindness or partial sight loss
Yes, 35 to 49 hours a week	Full or partial loss of voice or difficulty speaking (a condition that requires you to use equipment
Yes, 50 or more hours a week	to speak)
13 How well can you understand, speak, read	Learning disability (a condition that you have
and write English? ♦ Tick one box in each column	had since childhood that affects the way you learn, understand information and communicate)
Understand Speak Read Write (spoken)	Learning difficulty (a specific learning condition that affects the way you learn and process information)
Very well	Developmental disorder (a condition that you
Well	have had since childhood which affects motor, cognitive, social and emotional skills, and
Not well	speech and language)
Not at all	Physical disability (a condition that substantially limits one or more basic physical activities such as walking, climbing stairs, lifting or carrying)
14 Can you understand, speak, read and write Scottish Gaelic or Scots?  ◆ Tick all that apply	Mental health condition (a condition that affects your emotional, physical and mental wellbeing)
Understand Speak Read Write (spoken)	Long-term illness, disease or condition (a condition, not listed above, that you may have
Scottish Gaelic	for life, which may be managed with treatment or medication)
Scots	Other condition, please write in:
or	
☐ No skills in either language	
15 Can you use British Sign Language (BSL)?	☐ No condition
☐ Yes ☐ No	19 Are your day-to-day activities limited
16 What is your main language?  ◆ Tick one box only	because of a health problem or disability which has lasted, or is expected to last, at least 12 months?
☐ English	Include problems related to old age
Other, please write in (including BSL and	Yes, limited a lot
TACTILE BSL):	Yes, limited a little
HOW O	□ No
	Page 23

Individual questions — Person 4			
20 What passports do you hold?  ♦ Tick all that apply	2:	3 What is your ethnic group? Choose ONE section from A to F, then tick ONE box which best describes your ethnic group or	i
☐ United Kingdom		background	
☐ Ireland	Α	White	
Other, please write in:		Scottish	
		Other British	
		☐ Irish☐ Polish	
		Gypsy / Traveller	
None		Roma	
21 What religion, religious denomination or		Showman / Showwoman	
body do you belong to?  ♦ This question is voluntary		Other white ethnic group, please write in:	
_			
None	В	Mixed or multiple ethnic groups	
Church of Scotland		Any mixed or multiple ethnic groups, please	
Roman Catholic		write in:	
Other Christian, please write in below:			
Muslim, write in denomination or school below:			
Hindu	С	Asian, Scottish Asian or British Asian	
☐ Buddhist		Pakistani, Scottish Pakistani or British Pakistani	
Sikh		☐ Indian, Scottish Indian or British Indian	
Jewish		Bangladeshi, Scottish Bangladeshi or British Bangladeshi	
☐ Pagan		Chinese, Scottish Chinese or British Chinese	
Another religion or body, please write in:		Other, please write in:	
22 What do you feel in your national identity?	D	African, Scottish African or British African	
22 What do you feel is your national identity?  Tick all that apply		Please write in (for example, NIGERIAN, SOMALI):	
Scottish			
☐ English	Ε	Caribbean or Black	
☐ Northern Irish		Please write in (for example, SCOTTISH CARIBBEAN, BLACK SCOTTISH):	
☐ Welsh		OANIBEAN, BEACK SCOTTISTI).	
☐ British			
Other, please write in:	F	Other ethnic group  Arab, Scottish Arab or British Arab	
		Other, please write in (for example, SIKH,	
		JEWISH):	0.
			HOv1.0
Page 24			

	Individual questions — Person 4	
	24 If you are aged 16 or over ⇒ go to 25	27 In the last seven days, were you doing any
	If you are aged 15 or under ⇒ go to 41	of the following?  ♦ Include casual or temporary work, even if only for one hour
	25 Which of these qualifications do you have?	◆ Tick all that apply
	◆ Tick <b>all</b> that apply	Working as an employee → go to 33
	O Grade, Standard Grade, National 3, 4 or 5, Intermediate 1 or 2, GCSE, CSE or equivalent	☐ Self-employed or freelance → go to 33 ☐ Temporarily away from work ill, on holiday or
	Higher, Advanced Higher, SCE Higher Grade, CSYS, A Level, AS Level or equivalent	temporarily laid off → go to 33  On maternity or patemity leave → go to 33
	Apprenticeship (trade or equivalent)	☐ Doing any other kind of paid work → go to 33
	Apprenticeship (Foundation or equivalent)	None of the above
	Apprenticeship (Modern or equivalent)	28 Which of the following describes what you were doing in the last seven days?
	Apprenticeship (Graduate or equivalent)	◆ Tick all that apply     Retired (whether receiving a pension or not)
	GSVQ Foundation or Intermediate, SVQ level 1 or 2, SCOTVEC Module, City and Guilds Craft	Studying
	or equivalent	Looking after home or family
	GSVQ Advanced, SVQ level 3, ONC, OND,	Long-term sick or disabled
	SCOTVEC National Diploma, City and Guilds Advanced Craft or equivalent	Other
	☐ HNC, HND, SVQ level 4 or equivalent	29 In the last four weeks, were you actively looking for any kind of paid work?
	Other school qualifications not already mentioned (including foreign qualifications)	Yes No
	Other post-school but pre-Higher Education	30 If a job became available now, could you start it within two weeks?
	qualifications not already mentioned (including foreign qualifications)	Yes No
	Degree, Postgraduate qualifications, Masters, PhD, SVQ level 5 or equivalent	31 In the last seven days, were you waiting to start a job already accepted?
	Professional qualifications (for example,	Yes No
	teaching, nursing, accountancy)	32 Have you ever done any paid work?
	Other Higher Education qualifications not	Yes, in the last 12 months
	already mentioned (including foreign qualifications)	Yes, but not in the last 12 months
	No qualifications	No, have never worked → go to 41
		33 Answer the remaining questions for your
	26 Have you previously served in the UK	main job or, if not working, your last main job.
	Armed Forces?  ♦ Current serving members should only tick 'No'	Your main job is the job in which you usually work (worked) the most hours
	☐ No	34 In your main job, what is (was) your employment status?
	Yes, previously served in <b>Regular</b> Armed Forces	Employee
1.0		Self-employed or freelance without employees
HOv1.0	Yes, previously served in Reserve Armed Forces	Self-employed with employees
		Page 25

Individual questions — Person 4	
35 What is (was) the name of the organisation or business you work (worked) for?  ◆ If you are (were) self-employed in your own business, please write in your business name:	41 If you currently work or study (or both)  → go to 42  If you do not currently work or study, including if you are retired → go to 44
or ☐ No organisation or work (worked) for a private individual  36 What is (was) your full job title?  ◆ For example, RETAIL ASSISTANT, OFFICE CLEANER, DISTRICT NURSE, PRIMARY SCHOOL TEACHER  ◆ Do not state your grade or pay band	42 What address do you travel to for your main job or course of study (including school)?  ◆ Answer for the place where you spend the most time  ◆ If you report to a depot, please write in the depot address  Work mainly at, or from, home → go to 44  □ Distance learning, home schooled or equivalent → go to 44  □ No fixed place → go to 43  □ Work on an offshore installation → go to 43  □ The address below, please write in:
37 Briefly describe what you do (did) in your main job.	Postcode
	The address entered above is my place of  Work  Study
38 What is (was) the main activity of your organisation, business or freelance work?  ♦ For example, ARMED FORCES, WOMEN'S CLOTHING RETAILER, HOSPITAL, PRIMARY EDUCATION, FISH WHOLESALER  ♦ If you are (were) a civil servant, please write GOVERNMENT and give the name of your department. For example, MARINE SCOTLAND  ♦ If you are (were) a local government officer, please write LOCAL GOVERNMENT and give the name of your department. For example, SOCIAL SERVICES, TRANSPORT DEPARTMENT  39 Do (did) you supervise or oversee the work of other employees on a day-to-day basis?	43 How do you usually travel to your main job or course of study (including school)?  ◆ Answer for your usual travel to the place where you spend the most time  ◆ Tick the box for the longest part of your journey by distance  ◆ Tick one box only  □ Driving a car or van □ Passenger in a car or van □ Taxi or private hire □ Motorcycle, scooter or moped □ On foot □ Bicycle □ Bus, minibus or coach □ Train □ Underground, subway or tram □ Other
Yes	44 There are no more questions for Person 4.  If there are no more people in your household please leave the following pages blank.  Otherwise go to questions for Person 5.  If you included anyone in question H5, record their details on the back page.  Remember to sign the declaration on page 1.
Page 26	1

Individual questions — Person 5	
1 What is your name? (Person 5 in H3 on page 3)  First name(s)  Last name  2 What is your date of birth?  Day Month Year	8 Which of the following best describes your sexual orientation?  ◆ This question is voluntary  ◆ Answer only if you are aged 16 or over  ◆ Tick one box only  □ Straight / Heterosexual  □ Gay or Lesbian  □ Bisexual  □ Other sexual orientation, please write in:
3 What is your sex?	
3 What is your sex? ☐ Female ☐ Male	9 What is your country of birth?
4 Do you consider yourself to be trans, or have a trans history?  5 This question is voluntary  6 Answer only if you are aged 16 or over  7 Trans is a term used to describe people whose gender is not the same as the sex they were registered at birth  7 Tick one box only	Scotland → go to 11 England → go to 11 Northern Ireland → go to 11 Wales → go to 11 Republic of Ireland
□ No	Elsewhere, please write in the current name of
Yes, please describe your trans status (for example, non-binary, trans man, trans woman):	the country:
On 21 March 2021, what is your legal marital or registered civil partnership status?      Never married and never registered in a civil	when did you most recently arrive to live here?  Do not count short visits away from the UK  Month Year
partnership  Married  In a registered civil partnership  Separated, but still legally married  Separated, but still legally in a civil partnership  Divorced  Formerly in a civil partnership which is now legally dissolved  Widowed  Surviving partner from a civil partnership	11 One year ago, what was your usual address?  If you had no usual address one year ago, state the address where you were staying  Same as Person 1  The address on the front of the questionnaire  Student term-time / boarding school address in the UK, please write in below:  Another address in the UK, please write in:
6 Are you a schoolchild or student in full-time education?  ☐ Yes ☐ No → go to 8	Postcode
7 During term-time, do you live:  □ at the address on the front of this questionnaire? □ at another address? → go to 44	Outside the UK, please write in country:
	Page 27

Individual questions — Person 5	
12 Do you look after, or give any help or support to family members, friends,	17 How is your health in general?
neighbours or others because of either:	Very good Good Fair Bad Very bad
long-term physical / mental ill-health / disability; or	
<ul> <li>problems related to old age?</li> <li>Do not count anything you do as part of your</li> </ul>	18 Do you have any of the following, which
paid employment	have lasted, or are expected to last, at least 12 months?
□ No	◆ Tick all that apply
Yes, 1 to 19 hours a week	Deafness or partial hearing loss
Yes, 20 to 34 hours a week	☐ Blindness or partial sight loss
Yes, 35 to 49 hours a week	Full or partial loss of voice or difficulty speaking
Yes, 50 or more hours a week	(a condition that requires you to use equipment to speak)
13 How well can you understand, speak, read	Learning disability (a condition that you have
and write English?	had since childhood that affects the way you learn, understand information and communicate)
♦ Tick <b>one</b> box in each column	Learning difficulty (a specific learning condition
Understand Speak Read Write (spoken)	that affects the way you learn and process
Very well	information)
Well	Developmental disorder (a condition that you have had since childhood which affects motor,
Not well $\square$ $\square$ $\square$	cognitive, social and emotional skills, and speech and language)
Not at all	Physical disability (a condition that substantially
	limits one or more basic physical activities such as walking, climbing stairs, lifting or carrying)
14 Can you understand, speak, read and write Scottish Gaelic or Scots?	Mental health condition (a condition that affects
♦ Tick all that apply	your emotional, physical and mental wellbeing)
Understand Speak Read Write (spoken)	Long-term illness, disease or condition (a condition, not listed above, that you may have
Scottish Gaelic	for life, which may be managed with treatment
- Control Gaelle	or medication)
Scots	Other condition, please write in:
or	
No skills in either language	
15 Can you use British Sign Language (BSL)?	■ No condition
Yes No	19 Are your day-to-day activities limited
16 What is your main language?	because of a health problem or disability
Tick one box only	which has lasted, or is expected to last, at least 12 months?
☐ English	♦ Include problems related to old age
Other, please write in (including BSL and	Yes, limited a lot
TACTILE BSL):	Yes, limited a little
	☐ No
Page 28	

Individual questions — Person 5	
20 What passports do you hold?  ♦ Tick all that apply	23 What is your ethnic group?  Choose ONE section from A to F, then tick ONE
☐ United Kingdom	box which <b>best describes</b> your ethnic group or background
☐ Ireland	A White
Other, please write in:	Scottish
Guier, piedes write in:	Other British
	☐ Irish
	Polish
None	☐ Gypsy / Traveller ☐ Roma
21 What religion, religious denomination or	Showman / Showwoman
body do you belong to?  ♦ This question is voluntary	Other white ethnic group, please write in:
None	B Mixed or multiple ethnic groups
Church of Scotland	Any mixed or multiple ethnic groups, please
Roman Catholic	write in:
Other Christian, please write in below:	
Muslim, write in denomination or school below:	
☐ Hindu	C Asian, Scottish Asian or British Asian
☐ Buddhist	Pakistani, Scottish Pakistani or British Pakistani
☐ Sikh	Indian, Scottish Indian or British Indian
☐ Jewish	Bangladeshi, Scottish Bangladeshi or British
Pagan	Banğladeshi Chinese or British Chinese
Another religion or body, please write in:	Other, please write in:
	D African, Scottish African or British African
22 What do you feel is your national identity?  Tick all that apply	Please write in (for example, NIGERIAN,
Scottish	SOMALI):
English	E Caribbaan ar Black
☐ Northern Irish	E Caribbean or Black ☐ Please write in (for example, SCOTTISH
Welsh	CARIBBEAN, BLACK SCOTTISH):
British	F Other ethnic group
Other, please write in:	Arab, Scottish Arab or British Arab
	Other, please write in (for example, SIKH, JEWISH):
O. 120	
	Page 29

27 In the last seven days, were you doing any of the following?
of the following?
Include casual or temporary work, even if only for one hour
<ul><li>♦ Tick all that apply</li><li>☐ Working as an employee ⇒ go to 33</li></ul>
<ul> <li>Self-employed or freelance → go to 33</li> <li>Temporarily away from work ill, on holiday or temporarily laid off → go to 33</li> </ul>
☐ On maternity or paternity leave → go to 33
☐ Doing any other kind of paid work → go to 33
None of the above
28 Which of the following describes what you were doing in the last seven days?  Tick all that apply
Retired (whether receiving a pension or not)
☐ Studying
Looking after home or family
Long-term sick or disabled  Other
29 In the last four weeks, were you actively looking for any kind of paid work?
☐ Yes ☐ No
30 If a job became available now, could you start it within two weeks?
Yes No
31 In the last seven days, were you waiting to start a job already accepted?
Yes No
32 Have you ever done any paid work?
Yes, in the last 12 months
Yes, but not in the last 12 months
No, have never worked   go to 41
33 Answer the remaining questions for your main job or, if not working, your last main
job. ♦ Your main job is the job in which you usually
work (worked) the most hours
34 In your main job, what is (was) your employment status?
s Employee
Self-employed or freelance without employees

Individual questions — Person 5	
35 What is (was) the name of the organisation or business you work (worked) for?  ◆ If you are (were) self-employed in your own business, please write in your business name:	41 If you currently work or study (or both)  → go to 42  If you do not currently work or study, including if you are retired → go to 44
or ☐ No organisation or work (worked) for a private individual  36 What is (was) your full job title?  ◆ For example, RETAIL ASSISTANT, OFFICE	42 What address do you travel to for your main job or course of study (including school)?  ♦ Answer for the place where you spend the most time  • If you report to a depot, please write in the depot address  Work mainly at, or from, home   go to 44  Distance learning, home schooled or equivalent  qo to 44
CLEANER, DISTRICT NURSE, PRIMARY SCHOOL TEACHER  Do not state your grade or pay band	No fixed place → go to 43  Work on an offshore installation → go to 43  The address below, please write in:
37 Briefly describe what you do (did) in your main job.	Postcode  The address entered above is my place of  Work  Study
38 What is (was) the main activity of your organisation, business or freelance work?  ◆ For example, ARMED FORCES, WOMEN'S CLOTHING RETAILER, HOSPITAL, PRIMARY EDUCATION, FISH WHOLESALER  ◆ If you are (were) a civil servant, please write GOVERNMENT and give the name	43 How do you usually travel to your main job or course of study (including school)?  Answer for your usual travel to the place where you spend the most time  Tick the box for the longest part of your journey by distance  Tick one box only
organisation, business or freelance work?  ◆ For example, ARMED FORCES, WOMEN'S CLOTHING RETAILER, HOSPITAL, PRIMARY EDUCATION, FISH WHOLESALER  ◆ If you are (were) a civil servant, please	or course of study (including school)?  Answer for your usual travel to the place where you spend the most time Tick the box for the longest part of your journey by distance Tick one box only Driving a car or van Passenger in a car or van Taxi or private hire Motorcycle, scooter or moped
organisation, business or freelance work?  ◆ For example, ARMED FORCES, WOMEN'S CLOTHING RETAILER, HOSPITAL, PRIMARY EDUCATION, FISH WHOLESALER  ◆ If you are (were) a civil servant, please write GOVERNMENT and give the name of your department. For example, MARINE SCOTLAND  ◆ If you are (were) a local government officer, please write LOCAL GOVERNMENT and give the name of your department. For example, SOCIAL SERVICES, TRANSPORT DEPARTMENT	or course of study (including school)?  Answer for your usual travel to the place where you spend the most time Tick the box for the longest part of your journey by distance Tick one box only Driving a car or van Passenger in a car or van Taxi or private hire Motorcycle, scooter or moped On foot Bicycle Bus, minibus or coach Train
organisation, business or freelance work? For example, ARMED FORCES, WOMEN'S CLOTHING RETAILER, HOSPITAL, PRIMARY EDUCATION, FISH WHOLESALER If you are (were) a civil servant, please write GOVERNMENT and give the name of your department. For example, MARINE SCOTLAND If you are (were) a local government officer, please write LOCAL GOVERNMENT and give the name of your department. For example, SOCIAL SERVICES, TRANSPORT DEPARTMENT  39 Do (did) you supervise or oversee the work of other employees on a day-to-day basis?	or course of study (including school)?  Answer for your usual travel to the place where you spend the most time Tick the box for the longest part of your journey by distance Tick one box only Driving a car or van Passenger in a car or van Taxi or private hire Motorcycle, scooter or moped On foot Bicycle Bus, minibus or coach
organisation, business or freelance work?  ◆ For example, ARMED FORCES, WOMEN'S CLOTHING RETAILER, HOSPITAL, PRIMARY EDUCATION, FISH WHOLESALER  ◆ If you are (were) a civil servant, please write GOVERNMENT and give the name of your department. For example, MARINE SCOTLAND  ◆ If you are (were) a local government officer, please write LOCAL GOVERNMENT and give the name of your department. For example, SOCIAL SERVICES, TRANSPORT DEPARTMENT  ■ The provided Head of the p	or course of study (including school)?  Answer for your usual travel to the place where you spend the most time Tick the box for the longest part of your journey by distance Tick one box only Driving a car or van Passenger in a car or van Taxi or private hire Motorcycle, scooter or moped On foot Bicycle Bus, minibus or coach Train Underground, subway or tram

# Household questions — people (H5 continued) Do not record details of household members here. Record details only for anyone counted in question H5 on page 3 (people whose permanent or family home is elsewhere). For more than three people, write their answers on a separate piece of paper and include it with this questionnaire. Remember to include children and babies Please make sure you have filled in the rest of the questionnaire and signed the declaration on page 1 Person A V1 What is this person's name? V4 What is this person's usual UK address? First name(s) Last name V2 What is this person's date of birth? Postcode Month Year Outside the UK, please write in country: V3 What is this person's sex? Female Male Person B V1 What is this person's name? V4 What is this person's usual UK address? First name(s) Same as Person A Last name V2 What is this person's date of birth? Postcode Day Month Year Outside the UK, please write in country: V3 What is this person's sex? Female ■ Male Person C V1 What is this person's name? V4 What is this person's usual UK address? First name(s) Same as Person A Last name V2 What is this person's date of birth? Day Month Year Postcode Outside the UK, please write in country: V3 What is this person's sex? Female ■ Male

# Paper Household Individual Questionnaire



Individual Questionnaire (HI)

### 21 March 2021

	If there is a <b>mistake</b> in the printed address, please write your correct address below:  Postcode
Scotland's Census 2021	Completing online
Scotland's Census is the official count of every person and household in the country.  The census is held every ten years and the answers you give to the questions will help shape Scotland's future public services.	You can complete this questionnaire online. Visit www.census.gov.scot and use the code below.  Your Internet Access Code:
What we would like you to do  Please complete this questionnaire on paper or online at www.census.gov.scot  You should provide information that is correct as of Sunday, 21 March 2021.  As you have requested to complete an individual census questionnaire, you have a	Help and support  The leaflet included has more information about how we can help and support you to complete the census questionnaire.  You can also visit www.census.gov.scot for more help or call our helpline FREEPHONE 0800 030 8308.
legal responsibility to complete it. You may be prosecuted if you refuse to complete the questionnaire, provide a false answer to a question, or if you sign a false document. In some cases, you may receive a criminal record and fine.  The questions about trans status or history, sexual orientation, and religion are voluntary. You do not have to answer these questions if you do not want to.	Start here Please make sure you are listed as a household member on the Household Questionnaire.  Copy your person number, as given in question H3 on a Household Questionnaire, or in question C2 on a Continuation Questionnaire, here:  Person number  Please refer to page 2 for full instructions.
Please make sure you are listed as a household member on the Household Questionnaire.	Declaration
Our pledge to you Your census return will be kept secure and will be kept confidential for 100 years.	The information provided in this questionnaire is full and accurate, as far as I know.  Signature
Paul Lowe, Registrar General for Scotland Thank you for helping to shape Scotland's future	Date

<b>Important</b>	guidance -	- before v	ou start
------------------	------------	------------	----------

#### What you have to do

- please check that the household address recorded on page 1 of this questionnaire is correct
- make sure you are included as a household member on the Household Questionnaire for the address on this questionnaire

If your Household Questionnaire was completed:

- ♦ ONLINE, make sure you are included as a household member in the online questionnaire, you will not need to write in a person number on page 1 of this questionnaire
- ♦ ON PAPER, make sure you are included as a household member in either:

  - question H3 on page 3 of a Household Questionnaire; or question C2 on page 1 of a Continuation Questionnaire (this is used only if there are more than five people living in your household)
  - → Copy your person number, from H3 or C2 on to page 1 of this questionnaire
- fill in questions 1 to 44 on pages 3 to 7 of this questionnaire
- sign the declaration on page 1 of this questionnaire and post it back using the pre-paid envelope provided

							-					п																
			AF	76	1	1	1	ш	r	١.	٠	ľ	1	П	2		ш	$\Pi$	es	4	П	0	m	In	12	àΙ	100	Δ
L	ı.	V	44			4	ш	ш	ш		L	ш	ш	L	•	ч	ľ	ш		21	1	U	ш	ш	10	41	ш	U

This questionnaire will be scanned by a computer. To make sure we record your answers correctly, follow the instructions below.

#### Please:

- use a black ink ballpoint pen
- tick your answers within the box like this:
- print your answers, in English, within the boxes like this: SMITH
- use capital letters one per box
- correct any mistakes like this: **②** or S M **③** I T H
- if a word will not fit on one line, continue on to the next line like this, if possible:

1	3	0	L	Α	D	У	W	Е	L	L	С	R	Е	S	С
Ε	Ν	Т													

DO NOT draw a line through questions or pages. The computer may mistake this for an answer.

Individual questions	
1 What is your name?	8 Which of the following best describes your
First name(s)	sexual orientation? This question is voluntary
	Answer only if you are aged 16 or over
Last name	Tick one box only
	Straight / Heterosexual
	Gay or Lesbian
2 What is your date of birth?  Day Month Year	☐ Bisexual
Day Month Teal	Other sexual orientation, please write in:
	Other Sexual orientation, please write in.
3 What is your sex?	
Female Male	9 What is your country of birth?
4 Do you consider yourself to be trans, or	☐ Scotland → go to 11
have a trans history?  This question is voluntary	☐ England → go to 11
<ul> <li>Answer only if you are aged 16 or over</li> </ul>	☐ Northern Ireland ➡ go to 11
<ul> <li>Trans is a term used to describe people whose gender is not the same as the sex they were</li> </ul>	☐ Wales <b>⇒</b> go to <b>11</b>
registered at birth	Republic of Ireland
◆ Tick one box only	
□ No	Elsewhere, please write in the current name of the country:
Yes, please describe your trans status (for example, non-binary, trans man, trans woman):	
	10 If you were not born in the United Kingdom,
5 On 21 March 2021, what is your legal	when did you most recently arrive to live here?
marital or registered civil partnership	♦ Do not count short visits away from the UK
status?	Month Year
Never married and never registered in a civil partnership	
Married	11 One year ago, what was your usual
In a registered civil partnership	address?  ♦ If you had no usual address one year ago, state
Separated, but still legally married	the address where you were staying
Separated, but still legally in a civil partnership	
☐ Divorced	☐ The address on the front of the questionnaire
Formerly in a civil partnership which is now	Student term-time / boarding school address in the UK, please write in below:
legally dissolved	Another address in the UK, please write in:
■ Widowed	
Cup it sing portrop from a sixtle and a salar	
Surviving partner from a civil partnership	
Surviving partner from a civil partnership  6 Are you a schoolchild or student in full-time education?	
	Postcode
6 Are you a schoolchild or student in full-time education?	Postcode
6 Are you a schoolchild or student in full-time education?  ☐ Yes ☐ No → go to 8	Postcode
6 Are you a schoolchild or student in full-time education?  ☐ Yes ☐ No → go to 8  7 During term-time, do you live: ☐ at the address on the front of this questionnaire?	Postcode  Outside the UK, please write in country:
6 Are you a schoolchild or student in full-time education?  ☐ Yes ☐ No → go to 8  7 During term-time, do you live: ☐ at the address on the front of this questionnaire?	
6 Are you a schoolchild or student in full-time education?  ☐ Yes ☐ No → go to 8  7 During term-time, do you live:	

12 Do you look after, or give any help or support to family members, friends, neighbours or others because of either:	Individual questions	
neighbours or others because of either:    long-term physical / mental ill-health / disability; or   problems related to old age?   Do not count anything you do as part of your paid employment   No   Yes, 1 to 19 hours a week   Tick all that apply   Deafness or partial hearing loss   Blindness or partial sight loss   Tick all that apply   Deafness or partial learing loss   Blindness or partial sight loss   Full or partial loss of voice or difficulty speaking (a condition that requires you to use equipment to speak)   Tick one box in each column   Understand Speak Read Write (spoken)   Not at all   Deafness or partial learing loss   Blindness or partial learing loss   Blindness or partial loss of voice or difficulty speaking (a condition that requires you to use equipment to speak)   Learning disability (a condition that you have had since childhood that affects the way you learn, understand information and communicate)   Learning difficulty (a specific learning condition that affects the way you learn and process information)   Developmental disorder (a condition that you have had since childhood which affects motor, cognitive, social and emotional skills, and speech and language)   Physical disability (a condition that substantially limits one or more basic physical activities such as walking, climbing stairs, lifting or carrying)   Long-term illness, disease or condition (a condition, polisted above, that you may have for life, which may be managed with treatment or medication)   Other condition, please write in:   Pare your day-to-day activities limited because of a health problem or disability which has lasted, or is expected to last, at least 12 months?   Include problems related to old age   Yes, limited a lott   Yes, limite		17 How is your health in general?
Por problems related to old age?	neighbours or others because of either: • long-term physical / mental ill-health /	Very good Good Fair Bad Very bad
No	<ul> <li>problems related to old age?</li> </ul>	
No		
yes, 1 to 19 hours a week  yes, 20 to 34 hours a week  yes, 35 to 49 hours a week  yes, 35 to 49 hours a week  13 How well can you understand, speak, read and write English?  Tick one box in each column  Understand Speak Read Write (spoken)  Well		
Yes, 20 to 34 hours a week   Blindness or partial sight loss   Full or partial loss of voice or difficulty speaking (a condition that requires you to use equipment to speak)   Tick one box in each column   Learning disability (a condition that you have had since childhood that affects the way you learn, understand information and communicate)   Learning difficulty (a specific learning condition that affects the way you learn, understand information and communicate)   Learning difficulty (a specific learning condition that substantially learning difficulty (a specific learning condition that affects the way you learn, understand information and communicate)   Developmental disorder (a condition that you have had since childhood which affects motor, cognitive, social and emotional skills, and speech and language)   Physical disability (a condition that substantially limits one or more basic physical activities such as walking, climbing stairs, lifting or carrying)   Physical disability (a condition that substantially limits one or more basic physical activities such as walking, climbing stairs, lifting or carrying)   Physical disability (a condition that substantially limits one or more basic physical activities such as walking, climbing stairs, lifting or carrying)   Congretern illness, disease or condition (a condition, physical and mental wellbeing)   Long-term illness, disease or condition (a condition, physical and mental wellbeing)   Congretern illness, disease or condition (a condition, physical and mental wellbeing)		_
Yes, 35 to 49 hours a week   Full or partial loss of voice or difficulty speaking (a condition that requires you to use equipment to speak)    Yes, 50 or more hours a week   Full or partial loss of voice or difficulty speaking (a condition that requires you to use equipment to speak)   Tick one box in each column   Learning difficulty (a specific learning condition that affects the way you learn, understand information and communicate)   Very well		I⊑*
Yes, 50 or more hours a week		
Learning disability (a condition that you have had since childhood that affects the way you learn, understand information and communicate)   Very well		(a condition that requires you to use equipment
and write English?  ◆ Tick one box in each column  Understand Speak Read Write (spoken)  Very well	Tes, 50 of filore flours a week	
that affects the way you learn and process information)  Very well	and write English?	had since childhood that affects the way you
Very well		that affects the way you learn and process
Not well	Very well	
Not well	Well	have had since childhood which affects motor,
limits one or more basic physical activities such as walking, climbing stairs, lifting or carrying)    Long-term illness, disease or condition (a condition, not listed above, that you may have for life, which may be managed with treatment or medication)   Scotts	Not well	
limits one or more basic physical activities such as walking, climbing stairs, lifting or carrying)    Long-term illness, disease or condition (a condition, not listed above, that you may have for life, which may be managed with treatment or medication)   Scotts	Not at all $\square$ $\square$ $\square$	Physical disability (a condition that substantially
Can you understand, speak, read and write Scottish Gaelic or Scots?     Tick all that apply		
Tick all that apply   Vour emotional, physical and mental wellbeing)		
Scottish Gaelic		
Scottish Gaelic		
Scots		for life, which may be managed with treatment
or  □ No skills in either language  15 Can you use British Sign Language (BSL)? □ Yes □ No  16 What is your main language? ◆ Tick one box only □ English □ Other, please write in (including BSL and TACTILE BSL): □ No condition  19 Are your day-to-day activities limited because of a health problem or disability which has lasted, or is expected to last, at least 12 months? ◆ Include problems related to old age □ Yes, limited a lot □ Yes, limited a little □ No	Scottish Gaelic	
No skills in either language   SL)?   No condition	Scots	Other condition, please write in:
15 Can you use British Sign Language (BSL)?  Yes	or	
Yes	☐ No skills in either language	
Yes	15 Can you use British Sign Language (BSL)?	No condition
because of a health problem or disability which has lasted, or is expected to last, at least 12 months?  ☐ English ☐ Other, please write in (including BSL and TACTILE BSL): ☐ What is your main language? ☐ because of a health problem or disability which has lasted, or is expected to last, at least 12 months? ☐ Include problems related to old age ☐ Yes, limited a lot ☐ Yes, limited a little ☐ No	Yes No	
<ul> <li>◆ Tick one box only</li> <li>□ English</li> <li>□ Other, please write in (including BSL and TACTILE BSL):</li> <li>□ Yes, limited a lot</li> <li>□ Yes, limited a little</li> <li>□ No</li> </ul>	16 What is your main language?	because of a health problem or disability
□ English □ Other, please write in (including BSL and TACTILE BSL): □ Yes, limited a lot □ Yes, limited a little □ No		
Other, please write in (including BSL and TACTILE BSL):    Yes, limited a little   No	☐ English	♦ Include problems related to old age
□ No	Other, please write in (including BSL and	Yes, limited a lot
	TACTILE BSL):	Yes, limited a little
Page 4		☐ No
	Page 4	

Individual questions	
20 What passports do you hold?  Tick all that apply	23 What is your ethnic group?  ♦ Choose ONE section from A to F, then tick ONE
☐ United Kingdom	box which <b>best describes</b> your ethnic group or background
□ Ireland	A White
Other, please write in:	Scottish
Other, please write in.	Other British
	☐ Irish
	│ │ Polish │ │ ☐ Gypsy / Traveller
None	Roma
21 What religion, religious denomination or	Showman / Showwoman
body do you belong to?  This question is voluntary	Other white ethnic group, please write in:
□ None	
	B Mixed or multiple ethnic groups
Church of Scotland	Any mixed or multiple ethnic groups, please
Roman Catholic	write in:
Other Christian, please write in below:	
Muslim, write in denomination or school below:	
Hindu	C Asian, Scottish Asian or British Asian
Buddhist	Pakistani, Scottish Pakistani or British Pakistani
Sikh	☐ Indian, Scottish Indian or British Indian
☐ Jewish	Bangladeshi, Scottish Bangladeshi or British Bangladeshi
☐ Pagan	Chinese, Scottish Chinese or British Chinese
Another religion or body, please write in:	Other, please write in:
20,441	D African, Scottish African or British African
22 What do you feel is your national identity?  Tick all that apply	Please write in (for example, NIGERIAN, SOMALI):
☐ Scottish	
☐ English	E Caribbean or Black
☐ Northern Irish	Please write in (for example, SCOTTISH CARIBBEAN, BLACK SCOTTISH):
☐ Welsh	SANIBEAN, BEAUTOUTHOU).
☐ British	C Other atheric group
Other, please write in:	F Other ethnic group  ☐ Arab, Scottish Arab or British Arab
	Other, please write in (for example, SIKH,
9	JEWISH):
1 × 1 × 1 × 1 × 1 × 1 × 1 × 1 × 1 × 1 ×	
L	Page 5

Individual questions	
24 If you are aged 16 or over ⇒ go to 25	27 In the last seven days, were you doing any of the following?
If you are aged 15 or under ➡ go to <b>41</b>	Include casual or temporary work, even if only for one hour
25 Which of these qualifications do you have?	◆ Tick all that apply
♦ Tick <b>all</b> that apply	☐ Working as an employee → go to 33
O Grade, Standard Grade, National 3, 4 or 5, Intermediate 1 or 2, GCSE, CSE or equivalent	☐ Self-employed or freelance → go to 33
	Temporarily away from work ill, on holiday or temporarily laid off   → go to 33
Higher, Advanced Higher, SCE Higher Grade, CSYS, A Level, AS Level or equivalent	☐ On maternity or paternity leave → go to 33
Apprenticeship (trade or equivalent)	☐ Doing any other kind of paid work → go to 33
Apprenticeship (Foundation or equivalent)	☐ None of the above
	28 Which of the following describes what you
Apprenticeship (Modern or equivalent)	were doing in the last seven days?  ♦ Tick all that apply
Apprenticeship (Graduate or equivalent)	Retired (whether receiving a pension or not)
GSVQ Foundation or Intermediate, SVQ level 1 or 2, SCOTVEC Module, City and Guilds Craft	☐ Studying
or equivalent	Looking after home or family
GSVQ Advanced, SVQ level 3, ONC, OND,	Long-term sick or disabled
SCOTVEC National Diploma, City and Guilds Advanced Craft or equivalent	Other
HNC, HND, SVQ level 4 or equivalent	29 In the last four weeks, were you actively looking for any kind of paid work?
Other school qualifications not already	Yes No
mentioned (including foreign qualifications)	30 If a job became available now, could you
Other post-school but pre-Higher Education qualifications not already mentioned (including	start it within two weeks?
foreign qualifications)	Yes No
Degree, Postgraduate qualifications, Masters, PhD, SVQ level 5 or equivalent	31 In the last seven days, were you waiting to start a job already accepted?
Professional qualifications (for example,	Yes No
teaching, nursing, accountancy)	32 Have you ever done any paid work?
Other Higher Education qualifications not	Yes, in the last 12 months
already mentioned (including foreign qualifications)	Yes, but not in the last 12 months
☐ No qualifications	No, have never worked → go to 41
	33 Answer the remaining questions for your
	main job or, if not working, your last main
26 Have you previously served in the UK Armed Forces?	main job or, it not working, your last main job.
	main job or, it not working, your last main
Armed Forces?  ◆ Current serving members should only tick 'No'	ipob.  Your main job is the job in which you usually work (worked) the most hours  34 In your main job, what is (was) your
Armed Forces?  ◆ Current serving members should only tick 'No'  □ No	main job or, it not working, your last main job.  Tour main job is the job in which you usually work (worked) the most hours
Armed Forces?  ♦ Current serving members should only tick 'No'	main job or, if not working, your last main job.  ♦ Your main job is the job in which you usually work (worked) the most hours  34 In your main job, what is (was) your employment status?

Individual questions	<u> </u>
35 What is (was) the name of the organisation or business you work (worked) for?  ◆ If you are (were) self-employed in your own business, please write in your business name:	41 If you currently work or study (or both)  → go to 42  If you do not currently work or study, including if you are retired → go to 44
or ☐ No organisation or work (worked) for a private individual  36 What is (was) your full job title?  ◆ For example, RETAIL ASSISTANT, OFFICE	42 What address do you travel to for your main job or course of study (including school)?  ♦ Answer for the place where you spend the most time  ♦ If you report to a depot, please write in the depot address  Work mainly at, or from, home   go to 44  Distance learning, home schooled or equivalent
CLEANER, DISTRICT NURSE, PRIMARY SCHOOL TEACHER  Do not state your grade or pay band	→ go to 44  No fixed place → go to 43  Work on an offshore installation → go to 43  The address below, please write in:
37 Briefly describe what you do (did) in your main job.	Postcode  The address entered above is my place of  Work  Study
20 Milest in (was) the main activity of your	
38 What is (was) the main activity of your organisation, business or freelance work?  ◆ For example, ARMED FORCES, WOMEN'S CLOTHING RETAILER, HOSPITAL, PRIMARY EDUCATION, FISH WHOLESALER  ◆ If you are (were) a civil servant, please write GOVERNMENT and give the name of your department. For example, MARINE	43 How do you usually travel to your main job or course of study (including school)?  Answer for your usual travel to the place where you spend the most time Tick the box for the longest part of your journey by distance Tick one box only
organisation, business or freelance work?  ◆ For example, ARMED FORCES, WOMEN'S CLOTHING RETAILER, HOSPITAL, PRIMARY EDUCATION, FISH WHOLESALER  ◆ If you are (were) a civil servant, please write GOVERNMENT and give the name	or course of study (including school)?  Answer for your usual travel to the place where you spend the most time Tick the box for the longest part of your journey by distance Tick one box only Driving a car or van Passenger in a car or van Taxi or private hire Motorcycle, scooter or moped
organisation, business or freelance work?  For example, ARMED FORCES, WOMEN'S CLOTHING RETAILER, HOSPITAL, PRIMARY EDUCATION, FISH WHOLESALER  If you are (were) a civil servant, please write GOVERNMENT and give the name of your department. For example, MARINE SCOTLAND  If you are (were) a local government officer, please write LOCAL GOVERNMENT and give the name of your department. For example, SOCIAL SERVICES, TRANSPORT DEPARTMENT	or course of study (including school)?  Answer for your usual travel to the place where you spend the most time Tick the box for the longest part of your journey by distance Tick one box only Driving a car or van Passenger in a car or van Taxi or private hire Motorcycle, scooter or moped On foot Bicycle Bus, minibus or coach Train
organisation, business or freelance work?  For example, ARMED FORCES, WOMEN'S CLOTHING RETAILER, HOSPITAL, PRIMARY EDUCATION, FISH WHOLESALER  If you are (were) a civil servant, please write GOVERNMENT and give the name of your department. For example, MARINE SCOTLAND  If you are (were) a local government officer, please write LOCAL GOVERNMENT and give the name of your department. For example, SOCIAL SERVICES, TRANSPORT DEPARTMENT  39 Do (did) you supervise or oversee the work of other employees on a day-to-day basis?	or course of study (including school)?  Answer for your usual travel to the place where you spend the most time Tick the box for the longest part of your journey by distance Tick one box only Driving a car or van Passenger in a car or van Taxi or private hire Motorcycle, scooter or moped On foot Bicycle Bus, minibus or coach Train Underground, subway or tram Other
organisation, business or freelance work?  For example, ARMED FORCES, WOMEN'S CLOTHING RETAILER, HOSPITAL, PRIMARY EDUCATION, FISH WHOLESALER  If you are (were) a civil servant, please write GOVERNMENT and give the name of your department. For example, MARINE SCOTLAND  If you are (were) a local government officer, please write LOCAL GOVERNMENT and give the name of your department. For example, SOCIAL SERVICES, TRANSPORT DEPARTMENT  39 Do (did) you supervise or oversee the work	or course of study (including school)?  Answer for your usual travel to the place where you spend the most time Tick the box for the longest part of your journey by distance Tick one box only Driving a car or van Passenger in a car or van Taxi or private hire Motorcycle, scooter or moped On foot Bicycle Bus, minibus or coach Train Underground, subway or tram

# Paper Communal Establishment Questionnaire



Communal Establishment Questionnaire (CE)

21 March 2021

	If there is a <b>mistake</b> in the printed address, please write your correct address below:  Postcode
Scotland's Census 2021	Completing online
Scotland's Census is the official count of every person in the country.	You can complete this questionnaire online. Visit www.census.gov.scot and use the code below.  Your Internet Access Code:
The census is held every ten years and the answers you give to the questions will help shape Scotland's future public services.	
What we would like you to do	Help and support
Please complete this questionnaire on paper or online at www.census.gov.scot	Refer to the Guidance Note for Managers for information on what you need to do and how to get help if you need it.
You should provide information that is correct as of Sunday, 21 March 2021.	You can also visit <b>www.census.gov.scot</b> for more help.
As the manager or person in charge, you have a legal duty to complete this questionnaire. You also have a legal responsibility to make arrangements for an individual questionnaire to be completed for any resident who is under 16 years of age or is incapable of doing so themselves.	What you have to do  Identify all usual residents and visitors to your establishment  Number of usual residents:
You may be prosecuted if you refuse to complete the questionnaire, provide a false answer to	Number of visitors:
a question, or if you sign a false document. In some cases, you may receive a criminal record and fine.	Refer to the Guidance Note for Managers for full instructions.
Our pledge to you	Declaration
Your census return will be kept secure and will be kept confidential for 100 years.	The information provided in this questionnaire is full and accurate, as far as I know.
	Signature
fr.	
Paul Lowe, Registrar General for Scotland Thank you for helping to shape Scotland's future	Date

	Establishment questions							
	How to fill in this questionnaire							
	This questionnaire will be scanned by a computer. To make sure we record your answers correctly, please follow the instructions below:							
	use a <b>black</b> ink ballpoint pen							
	tick your answers within the box like this: ☑; correct any mistakes like this: ፪							
ļ	DO NOT draw a line through questions or pages. T	he computer may mistake this for an answer.						
	1 What is the nature of this establishment?  ♦ Tick one box only	2 For questions 3 and 4 if there are no residents, write in number zero like this:						
	Medical and care	3 How many female residents usually reside						
	General hospital	at this establishment in each of the age ranges below?						
	Mental health hospital (including inpatient units)	0 to 15 years old						
	Other hospital							
	Care home without nursing	16 to 24 years old						
	Care home with nursing	25 to 34 years old						
	Children's home	35 to 49 years old						
	Other medical and care establishment	50 to 64 years old						
	Education	65 years old and over						
	School	oo years old and over						
	Halls of residence / student accommodation	4 How many male residents usually reside at this establishment in each of the age						
	Other educational establishment	ranges below?						
	Amend Farms	0 to 15 years old						
	Armed Forces  Defence establishment (including ships)	16 to 24 years old						
	Bololies sociation in the first (including of lips)	25 to 34 years old						
	Detention							
	Prison or young offenders' institution	35 to 49 years old						
	Immigration removal centre	50 to 64 years old						
	Travel	65 years old and over						
	Hotel, guest house, B&B, youth hostel	5 Who is responsible for the management of						
	Leisure / holiday establishment	this establishment?  ♦ Tick one box only						
	Other travel establishment	□ NHS						
	Hostel or shelter	☐ Local Authority						
	☐ Hostel or shelter for the homeless	Government department or agency						
	Other hostel or shelter establishment	Registered social landlord or housing association						
	Other							
	Religious establishment	Charity or voluntary organisation						
	Staff / worker accommodation only	Private owner or company						
	Other establishment	Higher or further education institution						
		Other						
	Page 2							

## Paper Communal Establishment Individual Questionnaire



Individual Questionnaire (CI)

### 21 March 2021

	If there is a <b>mistake</b> in the printed address, please write your correct address below:  Postcode
Scotland's Census 2021	Completing online
Scotland's Census is the official count of every person in the country.  The census is held every ten years and the answers you give to the questions will help shape Scotland's future public services.	You can complete this questionnaire online. Visit www.census.gov.scot and use the code below.  Your Internet Access Code:
The census will count everyone in Scotland on 21 March 2021, whether they usually live here or not.  What we would like you to do Please complete this questionnaire on paper or online at www.census.gov.scot	Help and support  The leaflet included has more information about how we can help and support you to complete the census questionnaire.  You can also visit www.census.gov.scot for more help or call our helpline FREEPHONE 0800 030 8308.
You should provide information that is correct as of Sunday, 21 March 2021.  You have a legal responsibility to complete this	Start here R1 Do you (or the person you are filling this in
questionnaire. You may be prosecuted if you refuse to complete the questionnaire, provide a false answer to a question, or if you sign a false document. In some cases, you may receive a criminal record and fine.	for) stay here because you are:  a resident (for example, patient, student, member of Armed Forces)?  a member of staff or the owner?
The questions about trans status or history, sexual orientation, and religion are voluntary. You do not have to answer these questions if you do not want to.	a family member, or partner, of a member of staff or the owner?  Declaration
Our pledge to you Your census return will be kept secure and will be kept confidential for 100 years.	I am aged 16 years or over and the information in this questionnaire is full and accurate, as far as I know. The information in this questionnaire is about:  me a person aged under 16 years or otherwise incapable of completing the questionnaire  Signature
Paul Lowe, Registrar General for Scotland Thank you for helping to shape Scotland's future	Date

Importa	unt guidance — before you start
	u have to do
answer	question R1 on page 1 of this questionnaire
• answer	questions 1 to 44 on pages 3 to 7 of this questionnaire
	eed help to complete your questionnaire, you can ask a family member, carer or the person ge of your establishment to help you fill it in
sign the	declaration on page 1 and put your questionnaire in the envelope provided
seal the question	e envelope and give it to the establishment manager or person in charge of collecting the nnaires
Remember: write in.	: if you are filling in this questionnaire for <b>someone else</b> , it is their information you need to
How to fi	ill in this questionnaire
	onnaire will be scanned by a computer. To make sure we record your answers correctly, estructions below.
Please:	Structions below.
	lack ink ballpoint pen
	r answers <b>within</b> the box like this:
	ur answers, in English, within the boxes like this:
	bital letters – one per box
correct a	any mistakes like this: ② or SM灸ITH
• if a word	d will not fit on one line, continue on to the next line like this, if possible:

Page 2

130 LADYWELL CRESC

**DO NOT** draw a line through questions or pages. The computer may mistake this for an answer.

Individual questions	コーニー コーニー コーニー コーニー コーニー コーニー コーニー コーニー
1 What is your name?	8 Which of the following best describes your
First name(s)	sexual orientation?  ♦ This question is voluntary
	♦ Answer only if you are aged 16 or over
Last name	♦ Tick one box only
	Straight / Heterosexual
2 What is your date of birth?	Gay or Lesbian
Day Month Year	☐ Bisexual
	Other sexual orientation, please write in:
3 What is your sex?	
Female Male	9 What is your country of birth?
4 Do you consider yourself to be trans, or	☐ Scotland ⇒ go to 11
have a trans history?	☐ England → go to 11
<ul> <li>This question is voluntary</li> <li>Answer only if you are aged 16 or over</li> </ul>	Northern Ireland → go to 11
Trans is a term used to describe people whose	Wales → go to 11
gender is not the same as the sex they were registered at birth	Republic of Ireland
♦ Tick <b>one</b> box only	Elsewhere, please write in the current name of
No	the country:
Yes, please describe your trans status (for example, non-binary, trans man, trans woman):	
	10 If you were not born in the United Kingdom,
	when did you most recently arrive to live
5 On 21 March 2021, what is your legal marital or registered civil partnership	here?  Do not count short visits away from the UK
status?	Month Year
Never married and never registered in a civil partnership	
☐ Married	11 One year ago, what was your usual address?
☐ In a registered civil partnership	♦ If you had no usual address one year ago, state
Separated, but still legally married	the address where you were staying
Separated, but still legally in a civil partnership	The address on the first of the succession
Divorced	The address on the front of the questionnaire
Formerly in a civil partnership which is now legally dissolved	Student term-time / boarding school address in the UK, please write in below:
☐ Widowed	Another address in the UK, please write in:
Surviving partner from a civil partnership	
6 Are you a schoolchild or student in full-time education?	
☐ Yes	Postcode
U No → go to 8	
7 During term-time, do you live:	Outside the UK, please write in country:
at the address on the front of this questionnaire?	Odiside the Or, please write in Country.
□ at another address? → go to 44	
L	Page 3

Individual questions	
12 Do you look after, or give any help or support to family members, friends,	17 How is your health in general?
neighbours or others because of either: Iong-term physical / mental ill-health / disability; or problems related to old age?	Very good Good Fair Bad Very bad
Do not count anything you do as part of your paid employment	18 Do you have any of the following, which have lasted, or are expected to last, at least 12 months?
No No	♦ Tick <b>all</b> that apply
Yes, 1 to 19 hours a week	Deafness or partial hearing loss
Yes, 20 to 34 hours a week	Blindness or partial sight loss
Yes, 35 to 49 hours a week  Yes, 50 or more hours a week	Full or partial loss of voice or difficulty speaking (a condition that requires you to use equipment to speak)
13 How well can you understand, speak, read and write English?  ♦ Tick one box in each column	Learning disability (a condition that you have had since childhood that affects the way you learn, understand information and communicate)
Understand Speak Read Write (spoken)	Learning difficulty (a specific learning condition that affects the way you learn and process information)
Very well	Developmental disorder (a condition that you have had since childhood which affects motor,
Not well	cognitive, social and emotional skills, and speech and language)
Not at all	Physical disability (a condition that substantially limits one or more basic physical activities such as walking, climbing stairs, lifting or carrying)
14 Can you understand, speak, read and write Scottish Gaelic or Scots?  ♦ Tick all that apply	Mental health condition (a condition that affects your emotional, physical and mental wellbeing)
Understand Speak Read Write (spoken)  Scottish Gaelic	Long-term illness, disease or condition (a condition, not listed above, that you may have for life, which may be managed with treatment or medication)
Scots $\square$ $\square$ $\square$	Other condition, please write in:
or	
☐ No skills in either language	
15 Can you use British Sign Language (BSL)?	☐ No condition
Yes	19 Are your day-to-day activities limited because of a health problem or disability which has lasted, or is expected to last, at least 12 months?  Include problems related to old age
English	Yes, limited a lot
Other, please write in (including BSL and TACTILE BSL):	Yes, limited a little
	□ No

Individual questions	
20 What passports do you hold?  Tick all that apply	23 What is your ethnic group?  ◆ Choose ONE section from A to F, then tick ONE
☐ United Kingdom	box which <b>best describes</b> your ethnic group or background
☐ Ireland	A White
	Scottish
Other, please write in:	Other British
	☐ Irish
	☐ Polish
None	Gypsy / Traveller
21 What religion, religious denomination or	│
body do you belong to?	Other white ethnic group, please write in:
♦ This question is voluntary	Grand with state of the group, please with a mile
None	
Church of Scotland	B Mixed or multiple ethnic groups  Any mixed or multiple ethnic groups, please
Roman Catholic	write in:
Other Christian, please write in below:	
☐ Muslim, write in denomination or school below:	
☐ Hindu	C Asian, Scottish Asian or British Asian
☐ Buddhist	Pakistani, Scottish Pakistani or British
Sikh	Indian, Scottish Indian or British Indian
Jewish	Bangladeshi, Scottish Bangladeshi or British
— □ Pagan	Bangladeshi Chinese, Scottish Chinese or British Chinese
Another religion or body, please write in:	Other, please write in:
y who who is resigned to be body, produce write in.	
	D African, Scottish African or British African
22 What do you feel is your national identity?	Please write in (for example, NIGERIAN,
♦ Tick all that apply	SOMALI):
Scottish	
☐ English	E Caribbean or Black
☐ Northern Irish	Please write in (for example, SCOTTISH CARIBBEAN, BLACK SCOTTISH):
☐ Welsh	
☐ British	5 Other other group
Other, please write in:	F Other ethnic group Arab, Scottish Arab or British Arab
	Other, please write in (for example, SIKH,
9	JEWISH):
0.75	
	Page 5

11	ndividual questions	Į.
24	4 If you are aged 16 or over ⇒ go to 25	27 In the last seven days, were you doing any
	If you are aged 15 or under → go to 41	of the following?  ♦ Include casual or temporary work, even if only for one hour
	5 Which of these qualifications do you have? Tick all that apply	◆ Tick all that apply     Working as an employee → go to 33
С	O Grade, Standard Grade, National 3, 4 or 5, Intermediate 1 or 2, GCSE, CSE or equivalent	☐ Self-employed or freelance → go to 33
С	Higher, Advanced Higher, SCE Higher Grade, CSYS, A Level, AS Level or equivalent	Temporarily away from work ill, on holiday or temporarily laid off   go to 33
Ļ		On maternity or paternity leave po to 33
	Apprenticeship (trade or equivalent)	☐ Doing any other kind of paid work → go to 33☐ None of the above
╚	Apprenticeship (Foundation or equivalent)	28 Which of the following describes what you
L	Apprenticeship (Modern or equivalent)	were doing in the last seven days?  Tick all that apply
-	Apprenticeship (Graduate or equivalent)	Retired (whether receiving a pension or not)
	GSVQ Foundation or Intermediate, SVQ level 1 or 2, SCOTVEC Module, City and Guilds Craft	Studying
	or equivalent	Looking after home or family
	GSVQ Advanced, SVQ level 3, ONC, OND, SCOTVEC National Diploma, City and Guilds Advanced Craft or equivalent	Long-term sick or disabled Other
	] HNC, HND, SVQ level 4 or equivalent	29 In the last four weeks, were you actively looking for any kind of paid work?
	Other school qualifications not already mentioned (including foreign qualifications)	Yes No
	Other post-school but pre-Higher Education	30 If a job became available now, could you start it within two weeks?
	qualifications not already mentioned (including foreign qualifications)	Yes No
	Degree, Postgraduate qualifications, Masters, PhD, SVQ level 5 or equivalent	31 In the last seven days, were you waiting to start a job already accepted?
	Professional qualifications (for example,	Yes No
	teaching, nursing, accountancy)	32 Have you ever done any paid work?
	Other Higher Education qualifications not already mentioned (including foreign	Yes, in the last 12 months
	qualifications)	Yes, but not in the last 12 months  No, have never worked   → go to 41
	No qualifications	
20	6 Have you previously served in the UK	33 Answer the remaining questions for your main job or, if not working, your last main
20	Armed Forces?	job. ♦ Your main job is the job in which you usually
		work (worked) the most hours
*	Current serving members should only tick 'No'	
•	Current serving members should only tick 'No'  No	34 In your main job, what is (was) your employment status?
•	] No	34 In your main job, what is (was) your
•		34 In your main job, what is (was) your employment status?

Individual questions	
35 What is (was) the name of the organisation or business you work (worked) for?  ◆ If you are (were) self-employed in your own business, please write in your business name:	41 If you currently work or study (or both)  → go to 42  If you do not currently work or study, including if you are retired → go to 44
or ☐ No organisation or work (worked) for a private individual	42 What address do you travel to for your main job or course of study (including school)?  ♦ Answer for the place where you spend the most time  ♦ If you report to a depot, please write in the depot address  Work mainly at, or from, home   • go to 44
36 What is (was) your full job title?  ◆ For example, RETAIL ASSISTANT, OFFICE CLEANER, DISTRICT NURSE, PRIMARY SCHOOL TEACHER  ◆ Do not state your grade or pay band	Distance learning, home schooled or equivalent  → go to 44  No fixed place → go to 43  Work on an offshore installation → go to 43  The address below, please write in:
37 Briefly describe what you do (did) in your main job.	
	Postcode  The address entered above is my place of  Work Study
38 What is (was) the main activity of your organisation, business or freelance work?  ◆ For example, ARMED FORCES, WOMEN'S CLOTHING RETAILER, HOSPITAL, PRIMARY EDUCATION, FISH WHOLESALER  ◆ If you are (were) a civil servant, please write GOVERNMENT and give the name	43 How do you usually travel to your main job or course of study (including school)?  ♦ Answer for your usual travel to the place where you spend the most time  ♦ Tick the box for the longest part of your journey by distance  ♦ Tick one box only
of your department. For example, MARINE SCOTLAND  If you are (were) a local government officer, please write LOCAL GOVERNMENT and give the name of your department. For example, SOCIAL SERVICES, TRANSPORT DEPARTMENT	<ul> <li>□ Driving a car or van</li> <li>□ Passenger in a car or van</li> <li>□ Taxi or private hire</li> <li>□ Motorcycle, scooter or moped</li> </ul>
	On foot Bicycle Bus, minibus or coach Train
39 Do (did) you supervise or oversee the work of other employees on a day-to-day basis?	Underground, subway or tram  Other
Yes No	44 There are no more individual questions.
40 In your main job, how many hours a week do (did) you usually work?  ♦ Include paid and unpaid overtime  0 to 15 16 to 30 31 to 48 49 or more	<ul> <li>Remember to sign the declaration on page 1</li> <li>Post the questionnaire back using the pre-paid envelope provided</li> </ul>
	Page 7

#### EXPLANATORY NOTE

(This note is not part of the Regulations)

These Regulations are made under the Census Act 1920. They are made for the purpose of enabling the Census (Scotland) Order 2020 ("the Order") to be carried into effect.

Regulation 3 sets out how a person required to make a return under the Order can make that return and when their obligation is discharged. It introduces schedules 1 to 4 which set out the questions, instructions and response options that a person making a return will be required to respond to if making a return online or by telephone, and schedules 5 to 8 which contain the questionnaires that a person making a return on paper will be required to use. The questions, instructions and response options in schedules 1 to 4 may be modified or translated for the purpose of making it easier for a person making a return to understand those questions, instructions and response options. The Registrar General may also modify the questionnaires in schedules 5 to 8 may for the purpose of making those questionnaires easier for a person making a return to understand or use.

Regulation 4 places duties on persons in charge of communal establishments to pass on access codes for online returns or paper questionnaires to those in their establishment required to make a return. (These access codes and questionnaires will have been provided by the Registrar General.) It also places a duty on those persons to collect completed paper questionnaires and deliver them to the Registrar General.

Regulation 5 imposes a duty to provide information reasonably required by the person obliged to make a census return to enable them to do so.

Regulation 6 provides that information given for census purposes must not be used, published or communicated other than for the purpose of the Census Act 1920, the Order or these Regulations.

Regulation 7 revokes the Census (Scotland) Regulations 2010 and the Census (Scotland) Amendment Regulations 2010.

Printed and published in the UK by The Stationery Office Limited under the authority and superintendence of Jeff James, the Oueen's Printer for Scotland.

<sup>©</sup> Crown copyright 2020